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**January 27, 2006  Volume 30, Issue 4**

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Editors Note: The Administrative Code Division is no longer accepting filings of the Regulatory Agenda's. The last submission date was January 9th, 2006. Any submissions after this date will not be published. The next acceptance period for Regulatory Agenda's will be May 1st, 2006 through June 30th, 2006 for the July publication of the Regulatory Agendas.

A reminder all Rules being submitted must now be changed from 29 Ill. Reg. to 30 Ill. Reg. in Main Source Note and Section Source Notes.
DEPARTMENT OF CENTRAL MANAGEMENT SERVICES

NOTICE OF PROPOSED AMENDMENT

1) **Heading of the Part:** Extensions of Jurisdiction

2) **Code Citation:** 80 Ill. Adm. Code 305

3) **Section Number:** Proposed Action:
   - 305.250 New Section

4) **Statutory Authority:** Implementing and authorized by Section 4b of the Personnel Code [20 ILCS 415/4b].

5) **A Complete Description of the Subjects and Issues Involved:** This change is as result of positions being included in the AFSCME bargaining unit and the agreement with AFSCME to include the positions under the Personnel Code.

6) **Will this rulemaking replace any emergency rulemaking currently in effect?** Yes

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

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

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

10) **Statement of Statewide Policy Objective:** These proposed amendments neither create nor expand any State mandate on units of local government, school districts or community college districts.

11) **Time, Place and Manner in which interested persons may comment on this proposed rulemaking:** Interested persons may submit written comments within 45 days after the date of publication to:

    Gina Wilson
    Illinois Department of Central Management Services
    720 Stratton Office Building
    Springfield, Illinois 62706

    217/785-1793

12) **Initial Regulatory Flexibility Analysis:**
DEPARTMENT OF CENTRAL MANAGEMENT SERVICES

NOTICE OF PROPOSED AMENDMENT

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, 2005

The full text of the Proposed Amendment is identical to the text of the Emergency Amendment that appears on page 1378 of this issue of the Illinois Register.
DEPARTMENT OF COMMERCE AND ECONOMIC OPPORTUNITY

NOTICE OF PROPOSED AMENDMENTS

1) **Heading of the Part:** Technology Advancement and Development Act Programs

2) **Code Citation:** 14 Ill. Adm. Code 545

3) **Section Numbers:**

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4) **Statutory Authority:** Implementing and authorized by the Technology Advancement and Development Act [20 ILCS 700].

5) **A Complete Description of the Subjects and Issues Involved:** The Homeland Security Market Development grant line was established to provide resources for the Department of Commerce and Economic Opportunity to provide financial incentives to public or private entities engaged in homeland security product research and development; product improvement or commercialization; planning and coordination; or for the improvement of homeland security services. The grant line may be used for activities generally consistent with the intent of Section 2002 of the Act such as providing investments, loans, or grants to individual businesses, partnerships or joint ventures that provide or commercialize products or services that meet homeland security or defense needs. Further, grant monies may be used to fund not-for-profit or educational institutions that make available resources and expertise that further homeland security prevention, recovery, planning, or service delivery; support development of the technical or managerial skills for business owners and entrepreneurs; aid commercial ventures in locating financing product or service development; and help new companies or partnerships with product development.

6) **Will this rulemaking replace an emergency rulemaking currently in effect?** Yes

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

8) **Does this rulemaking contain incorporations by reference?** No
DEPARTMENT OF COMMERCE AND ECONOMIC OPPORTUNITY

NOTICE OF PROPOSED AMENDMENTS

9)  Are there any proposed amendments pending on this Part?  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 Mandate Act (30 ILCS 805).

11)  Time, Place and Manner in which interested persons may comment on this proposed rulemaking:

    Jolene Clarke  
    Department of Commerce and Economic Opportunity  
    620 E. Adams Street  
    Springfield, Illinois 62701  

    217/557-1820  
    Fax: 217-782-0038  
    e-mail: jclarke@ildceo.net

12)  Initial Regulatory Flexibility Analysis:

    A)  Types of small businesses and small municipalities affected:  Programs will serve businesses, not-for-profits and educational entities of all sizes so long as they are engaged in the development or improvement of homeland security products, services or the support thereof.

    B)  Reporting, bookkeeping or other procedures required for compliance:  Quarterly reporting of expenditures related to receipt of grant dollars with a focus on job creation and leveraged investment.

    C)  Types of professional skills necessary for compliance:  Finance, accounting and legal.

13)  Regulatory Agenda on which this rulemaking was summarized:  This rulemaking was not included on either of the two most recent agendas because: the Department did not anticipate the additional funding for this new program.

The full text of the Proposed Amendments begins on the following page:
DEPARTMENT OF COMMERCE AND ECONOMIC OPPORTUNITY

NOTICE OF PROPOSED AMENDMENTS

TITLE 14: COMMERCE
SUBTITLE C: ECONOMIC DEVELOPMENT
CHAPTER I: DEPARTMENT OF COMMERCE AND ECONOMIC OPPORTUNITY

PART 545
TECHNOLOGY ADVANCEMENT AND DEVELOPMENT ACT PROGRAMS

SUBPART A: ADMINISTRATIVE REQUIREMENTS

Section
545.10 General Purpose
545.20 Definitions
545.30 Administrative Requirements

SUBPART B: TECHNOLOGY CHALLENGE GRANT PROGRAM

Section
545.110 Purpose
545.120 Authorized Programs and Activities
545.130 Eligible Applicants

SUBPART C: ENTERPRISE DEVELOPMENT AND INVESTMENT PROGRAM

Section
545.210 Purpose
545.220 Direct Investment Strategy
545.230 Portfolio Investment Strategy
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SUBPART D: BUSINESS MODERNIZATION PROGRAM

Section
545.310 Purpose
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545.340 Development Corporations
545.350 Manufacturing Extension Program
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DEPARTMENT OF COMMERCE AND ECONOMIC OPPORTUNITY

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SUBPART E: DIRECT GRANT, INVESTMENT, AND LOAN APPLICATION PROCEDURES

Section
545.410 Methods of Direct Grant, Investment, and Loan Application Submittal
545.420 Application Content
545.430 Screening of Applications
545.440 General Review Criteria
545.450 Program Specific Criteria

SUBPART F: HOMELAND SECURITY PROGRAM

Section
545.510 Purpose
545.520 Authorized Programs and Activities
545.530 Eligible Applicants
545.540 Eligible Costs
545.550 Ineligible Costs
545.560 Reporting Requirements

AUTHORITY: Implementing and authorized by the Technology Advancement and Development Act [20 ILCS 700].


SUBPART A: ADMINISTRATIVE REQUIREMENTS

Section 545.20 Definitions

a) Definitions in the Act: The following words and phrases, for the purpose of this rule, have the same meaning respectively ascribed to them in Section 1003 of the
DEPARTMENT OF COMMERCE AND ECONOMIC OPPORTUNITY

NOTICE OF PROPOSED AMENDMENTS

Act [20 ILCS 700/1003].

"Advanced technology project" means any area of basic or applied research or development which is designed to foster greater knowledge or understanding, or which is designed for the purposes of improving, designing, developing, prototyping, producing or commercializing new products, techniques, processes or technical devices in present or emerging fields of health care and biomedical research, information and communication systems, computing and computer services, electronics, manufacturing, robotics and materials research, transportation and aerospace, agriculture and biotechnology, and finance and services.

"Business expense" includes working capital financing, the purchase or lease of machinery and equipment, or the lease or purchase of real property, including construction, renovation, or leasehold improvements, but does not include refinancing current debt.

"Business project" means any specific economic development activity of a commercial, industrial, manufacturing, agricultural, scientific, financial, service or other not-for-profit nature, which is expected to yield an increase in jobs or to result in the retention of jobs or an improvement in production efficiency.

"Department" means the Illinois Department of Commerce and Economic Opportunity.

"Director" means the Director of the Illinois Department of Commerce and Economic Opportunity.

"Financial assistance" means a loan, investment, grant or the purchase of qualified securities or other means whereby financial aid is made available to or on behalf of a business project or advanced technology project.

"Illinois Coalition" means a not-for-profit, nonpartisan private-public partnership of the State's top leaders from business, labor, government, education, and research dedicated to strengthening Illinois' economy through science and technology. The Coalition develops statewide policy, positions, plans and programs that directly address the growth of the State's science and technology-based economy. The Coalition focuses development activities in the following areas: education, State and federal funding priorities, information technology, life sciences, advanced manufacturing, access to capital, and marketing and
DEPARTMENT OF COMMERCE AND ECONOMIC OPPORTUNITY

NOTICE OF PROPOSED AMENDMENTS

development. The Coalition works in concert with other industry associations, government entities, private enterprises and elected officials to accomplish its mission.

"Intermediary organization" means any participating organization including not-for-profit entities, for-profit entities, State development authorities, institutions of higher education, other public or private corporations, which may include the Illinois Coalition, the Illinois Terrorism Task Force, or other governmental or private entities necessary or desirable to further the purpose of this Act engaged by the Department through any contract, agreement, memoranda of understanding, or other cooperative arrangement to deliver programs authorized under the Act.

"Investment loan" means any loan structured so that the applicant repays the principal and interest and provides a qualified security investment to serve both as additional loan security and as an additional source of repayment.

"Loan" means acceptance of any note, bond, debenture, or evidence of indebtedness, whether unsecured or secured by a mortgage, pledge, deed of trust, or other lien on any property, or any certificate of, receipt for, participation in, or an option to any of the foregoing. A loan shall bear such interest rate, with such terms of repayment, secured by such collateral, with other terms and conditions, as the Department shall deem necessary or appropriate.

"Participating lender or investor" means any trust company, bank, savings bank, credit union, merchant bank, investment bank, broker, investment trust, pension fund, building and loan association, savings and loan association, insurance company, venture capital company or other institution, community or State development corporation, development authority authorized to do business by an Act of this State, or other public or private financing intermediary approved by the Department whose purposes include financing, promoting, or encouraging economic development financing.

"Qualified security investments" means any stock, convertible security, treasury stock, limited partnership interest, certificate of interest or participation in any profit sharing agreement, preorganization certificate or subscription, transferable share, investment contract, certificate of interest or participation in a patent or application or, in general, any interest or instrument commonly known as a "security" or any certificate for, receipt for, guarantee of, or option, warrant or right to subscribe to or purchase any of the foregoing, but not including any
DEPARTMENT OF COMMERCE AND ECONOMIC OPPORTUNITY

NOTICE OF PROPOSED AMENDMENTS

instrument which contains voting rights or which can be converted to contain voting rights in the possession of the Department.

b) Other Definitions:

"Act" means the Technology Advancement and Development Act [20 ILCS 700].

"Leveraged dollar award" means grant funds awarded to the grant applicant intended to be used as leverage to secure additional funding from other public or philanthropic sources.

"Partnership" or "joint venture" means any organization, formed either through contract or mutual agreement, where two or more persons agree to do business together.

"Product" means a commodity or service with commercial value that is either further developed or brought to market through use of grant funds.

"Recipient" means any entity receiving financial assistance under the Act.

"Service" means any service that would advance the commercialization of a technology with applicability to the homeland security industry. This would include, but is not limited to, the protection of intellectual property rights, business continuity and recovery, research and development, and technology integration.

"Small and medium size business" means any for-profit business with 1,000 or fewer employees assigned to work locations within the State of Illinois.

(Source: Amended at 30 Ill. Reg. ______, effective ____________)

SUBPART B: TECHNOLOGY CHALLENGE GRANT PROGRAM

Section 545.120 Authorized Programs and Activities

a) Grants may be awarded for the activities specified at Section 2002 of the Act, including:

1) Advanced Technology Projects – The Department may award initial grant funds for applied innovation research projects that respond to unique,
DEPARTMENT OF COMMERCE AND ECONOMIC OPPORTUNITY

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advanced technology projects and which foster the development of Illinois' economy through the advancement of the State's economic, scientific, and technological assets.

2) Leveraged Technology Projects – The Department may award initial grant funds for applied innovation research projects to assist eligible applicants in the State to apply for, or qualify for and leverage, federal funds awarded for advanced technology projects concerning research and development, business innovation research or technical development, or transfer of useful technology to the private sector.

3) University-Industry Partnerships – The Department may grant funds for joint university and industry initiatives that create high-skill employment opportunities and internship activities that enable graduates and faculty to stay and work in Illinois. The Department may also grant funds for joint university and industry initiatives designed to strengthen the relationship between industry and academia, so that applied university research is responsive to the needs of Illinois' industries.

4) Technology Commercialization Centers – The Department may award grant funds to create and operate centers of excellence in technology commercialization, innovation evaluation, and intellectual property management that encourages the growth of new enterprises based on technologies developed at Illinois research centers, including technology partnerships, technology consortiums or research centers, and industry technology associations that are, or will be, established to perform research and development in present and emerging technologies that can be developed for use by commerce and industry.

5) Technology Transfer Projects – The Department may award grant funds for technology transfer projects involving promotion of new or innovative technologies among small and medium-sized Illinois manufacturers where the technologies have immediate commercial application.

6) Continuous Improvement Projects – The Department may award grant funds to provide for planning and operational support for statewide support that improves practices in technology commercialization, including needs assessment and evaluation of the status of technology implementation throughout the State. [20 ILCS 700/2002]
7) **Capacity and Program Development Projects** – The Department may award grant funds to qualified not-for-profit organizations or educational institutions in order to support service delivery improvement projects, in order to extend Department capacity in relation to implementation of homeland security market development programs, or for the operation of legislatively directed councils or coordinating bodies.

8) **Product and Service Development Projects** – The Department may award grant funds to individual companies or partnerships with operations in Illinois for products or professional services that address unique or emerging national needs in homeland security, safety or defense, or support the development of solutions to these needs.

b) **Allowable Costs** – Allowable costs are specified in Section 2002(b) of the Act, including costs for capital improvements, equipment, contractual services, commodities, personnel, support costs, including telecommunications, electronic data and commodities, or other costs. All costs are subject to the approval of the Department. Indirect costs shall be limited to no more than 15% of direct grant costs. [20 ILCS 700/2002(b)]

c) **Combination with Technology Enterprise Development Centers** – As a means of increasing cost efficiency of program delivery, the Department may combine program responsibilities for activities authorized under subsection (a)(4), Technology Commercialization Centers, with activities authorized under Technology Enterprise Development Centers, as described in Section 545.240 of this Part. As authorized by the Department through an agreement, Technology Enterprise Development Centers may serve as Technology Commercialization Centers.

(Source: Amended at 30 Ill. Reg. ______, effective ____________)

**SUBPART F: HOMELAND SECURITY PROGRAM**

**Section 545.510 Purpose**

In accordance with the general intent of Section 2001 of the Act [20 ILCS 700/2001] the Homeland Security Market Development Program is intended to support the development and/or application of homeland security-related products or services, conditioned upon these products or services addressing demonstrated needs in homeland security and/or defense.
NOTICE OF PROPOSED AMENDMENTS

Section 545.520  Authorized Programs and Activities

The Homeland Security Market Development Program may be used for activities generally consistent with the intent of Section 2002 of the Act, such as providing investments, loans, or grants to individual businesses, partnerships or joint ventures that provide or commercialize products or services that meet homeland security or defense needs. Further, grant monies may be used to fund not-for-profit or educational institutions that make available resources and expertise that further homeland security prevention, recovery, planning, or service delivery; support development of the technical or managerial skills for business owners and entrepreneurs; aid commercial ventures in locating financing product or service development; and help new companies or partnerships with product development.

Section 545.530  Eligible Applicants

The Department may provide an award of grant funds, make a loan to, or provide an investment in any entity, partnership, or joint venture located, or with substantial operations, in the State of Illinois. Grant funding will be awarded based on the qualifications and expertise of the entity and the ability of the entity to demonstrate a sufficient need for its proposed project.

Section 545.540  Eligible Costs

Grant, loan or investment funds may be used toward the development, production, or commercialization of any product or service with application in both homeland security and another commercial sector. Grant funds may be used to hire technical staff, to engage third-party consultants and professional service providers, or for other uses as the Department deems appropriate in order to assist with homeland security product or service development, the support of programs that contribute to product or service development, or activities that accelerate commercial application of the product or service.

Section 545.550  Ineligible Costs
DEPARTMENT OF COMMERCE AND ECONOMIC OPPORTUNITY

NOTICE OF PROPOSED AMENDMENTS

Grant, loan or investment funds are not intended to finance long-term research projects. They are intended to accelerate the development and production of homeland security products. Funds may not be used for general or routine administrative purposes.

(Source: Added at 30 Ill. Reg. _____, effective ____________)

Section 545.560 Reporting Requirements

Unless otherwise specified in the agreement between the Department and the recipient, an entity receiving financial assistance shall report financial and programmatic data to the Department on a regular basis using formats provided by the Department. Report formats and content shall be customized to the specific program and form of financial assistance. The Department requires quarterly reporting of expenditures and program achievements at a level of detail sufficient to provide for program accountability.

a) Expenditures – Unless otherwise specified in the agreement with the Department or an intermediary organization, an entity receiving financial assistance shall report actual expenditure of financial assistance using expenditure formats supplied by the Department. Expenditure summaries are to be submitted to the Department by the 15th day following the end of each fiscal quarter in which any expenditure of financial assistance is made. All award dollars must be expended within 24-months after receipt. Failure to do so may trigger the Department to initiate fund recovery activities.

b) Program Report – Unless otherwise specified in the agreement with the Department or an intermediary organization, an entity receiving financial assistance shall submit a program report in a format provided by the Department. The program report shall include a narrative describing the entity's progress toward achievement of objectives and activities as specified in the agreement with the Department or an intermediary organization. Program reports shall be submitted to the Department by the 15th day following the end of each fiscal quarter.

(Source: Added at 30 Ill. Reg. _____, effective ____________
NOTICE OF PROPOSED AMENDMENTS

1) **Heading of the Part:** Consumer Installment Loan Act

2) **Code Citation:** 38 Ill. Adm. Code 110

3) **Section Numbers:**

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NOTICE OF PROPOSED AMENDMENTS

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4) **Statutory Authority:** Consumer Installment Loan Act [205 ILCS 670]

5) **A Complete Description of the Subjects and Issues Involved:** Technical amendments were made to Sections 110.300, 110.370 and 110.410 due to preemption by the Payday Loan Reform Act. Subpart C, Mortgage Lending is repealed due to codification by the High Risk Home Loan Act [815 ILCS 137]. Additional technical changes were made to the entire Part, e.g., by changing references from "Department" to "Division" to reflect
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the consolidation of agencies into the Department of Financial and Professional Regulation and the creation of the Division of Financial Institutions.

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 this rulemaking contain incorporations by reference? No

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

10) Statement of Statewide Policy Objectives: This rulemaking has no impact on local government.

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
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: 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: January 2006
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The full text of the Proposed Amendments begins on the next page:
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TITLE 38: FINANCIAL INSTITUTIONS
CHAPTER I: DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION

PART 110
CONSUMER INSTALLMENT LOAN ACT

SUBPART A: GENERAL PROVISIONS

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110.TABLE B  Rule of 78 Percentage Rebate Table (Repealed)

AUTHORIZED: Implementing and authorized by Section 22 of the Consumer Installment Loan Act [205 ILCS 670/22].


SUBPART A: GENERAL PROVISIONS

Section 110.1 Definitions

"Act" means the Consumer Installment Loan Act [205 ILCS 670].

"Controlling person" means a person owning or holding the power to vote 25% or more of the outstanding voting securities of a licensee or the power to vote the securities of another controlling person of the licensee. For purpose of determining the percentage of a licensee controlled by a controlling person, the person's interest shall be combined with the interest of any other person controlled, directly or indirectly, by that person or by a spouse, parent, or child of that person.

"Date of the loan" means the date on which the loan agreement is signed or
accepted by the lender.

"Department" means the Department of Financial and Professional Regulation-Institutions.

"Director" means the Director of the Department of Financial and Professional Regulation-Division of Financial Institutions with the authority delegated by the Secretary Institutions.

"Division" means the Department of Financial and Professional Regulation-Division of Financial Institutions.

"Generally accepted accounting procedures" or "GAAP" means those adopted by the American Institute of Certified Public Accountants and Federal Accounting Standards Board.

"Hypothecate" means to pledge a security instrument without transfer of Title.

"Insurance Code" means 215 ILCS 5.

"Obligor" means the person to whom the proceeds of a loan are delivered or on whose behalf the proceeds of a loan are expended.

"Person" means an individual, partnership, association, joint stock association, corporation, or any other form of business organization.

"Recording fee" is a fee paid to a government agency to record or release a security instrument.

"Sales Finance Agency Act" means 205 ILCS 660.

"Secretary" means the Secretary of the Department of Financial and Professional Regulation.

"Uniform Commercial Code" means 810 ILCS 5.

(Source: Amended at 30 Ill. Reg. , effective )

Section 110.10 Minimum Requirements for Office Records
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a) Every licensee shall keep the following records at the licensed location:

1) Loan register.

2) Individual account records, including transaction histories of obligors.

3) File of all original papers.

4) Cash book.

5) Alphabetical record of all co-makers, obligors or sureties.

6) Permanent file.

b) Records for loans made under the Act shall be kept separate or readily identifiable from other types of business conducted in the office.

c) Electronic data processing, combination forms and special office systems may be used if in accordance with standard accounting procedures and if they contain the information enumerated in subsection (a) above.

(Source: Amended at 30 Ill. Reg. _______, effective ____________)

Section 110.15 Application for License; Controlling Person

a) An application for a license must be in writing, under oath, and in the form the Director prescribes. The application shall contain the following:

1) The name of the applicant and the address of the proposed place of business;

2) The form of business organization of the applicant, including:

   A) a copy of its filed articles of incorporation;

   B) a copy of the filed articles of organization, if the applicant is a limited liability company;

   C) a certified statement of the ownership of the partnership and any subsequent changes to the ownership, if the applicant is a
3) The name, business and home address, credit report (except for a publicly traded company) and a chronological summary of the business experience, material litigation history, and felony convictions over the preceding 10 years of:

A) the proprietor, if the applicant is an individual;
B) every general partner, if the applicant is a partnership;
C) President, Secretary, Executive and Senior Vice Presidents, Directors and individuals owning more than 25% of the corporate stock, if the applicant is a corporation; and
D) the manager, if the applicant is a limited liability company.

A licensee shall not submit the information required in subsections (a)(2) and (3) of this Section if the licensee has previously submitted the information to the Division in a previous license application within the last 5 years and there have been no material changes, unless requested to by the Director.

4) The most current year end financial statements, prepared in accordance with generally accepted accounting principles (Miller Comprehensive GAAP Guide, Harcourt Brace & Co., 6277 Sea Harbor Dr., Orlando FL 32877 (1998, no subsequent dates or editions)) and a balance sheet and statement of operations as of the most recent quarterly report before the date of the application.

5) A list of all states in which the applicant is licensed as a lender or sales finance agency and whether the licenses of the applicant has ever been withdrawn, refused, cancelled or suspended in any other state, with full details.

6) Bond as required by the Act.

7) Appointment of Attorney-in-Fact.

8) Business Plan, which shall only detail the nature, amount and term of
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loans to be made and types of security that will be taken.

9) Photographs of both the inside and outside of the proposed site.

10) Details of any other businesses that will be conducted within the licensed premises.

11) Information Form.

12) The applicable fees as required by the Act.

13) Any additional information the Director considers necessary.

b) A licensee that is a corporation must notify the Director within 15 days after a person becomes a controlling person. Upon notification, the Director may require all information he or she considers necessary to determine if a new application is required. A licensee that is an entity other than a corporation shall submit a new application to the Director seeking prior approval whenever a person proposes to become a controlling person or acquire an ownership interest.

(Source: Amended at 30 Ill. Reg. ______, effective ____________)

Section 110.20 Loan Register

a) The loan register shall contain the original entry and shall be a permanent record, and shall show for every loan the account number, date of loan, amount of loan, name of obligor, nature of security by types, amount of fees, the cost and type of any insurance, and the amount of the note, including precomputed interest, the simple interest rate contracted for or amount of precomputed interest.

b) The loan register shall be kept numerically by number of loans in order made, and shall have headings for each of the items required.

(Source: Amended at 30 Ill. Reg. ______, effective ____________)

Section 110.30 Individual Account Records

a) An individual account record shall be kept for each obligor. Such account record shall show the name and address of the obligor, co-makers, or sureties, loan number, date of loan, the number of payments, the amount of payments and
payment due dates, nature of security by type, type and cost of insurance and name of bank if the note is hypothecated. The record for a simple interest loan shall show the original principal amount of the loan, rates of interest and finance charge where applicable. The record for a precomputed loan shall show the original principal amount of the loan, excluding the precomputed interest and charges, the amount of the finance charge and the face amount of the note including the finance charge. The record shall also show the amount of official fees received and paid out for filing, recording or releasing a financing statement or security agreement, including the fee required by the Secretary of State for perfecting a lien on a motor vehicle title.

b) The record for a simple interest loan shall show the amount and date of each payment of principal and interest, the balance due on principal, and the date to which interest is paid. If the amount paid is insufficient to meet the entire amount of interest due, the record shall be clearly marked to indicate the extent of credit given for such interest payment and the date to which interest is paid. Upon the Division's or obligor's request involving a specific account or accounts, the licensee shall provide the amount of interest deficient.

c) The account record for a precomputed loan shall show the amount and date of each payment applied to the loan, the unpaid balance of the loan after applying such payment, and the date and amount of any additional interest collected for delinquency, default or deferment. If deferment interest is collected in whole or in part, the record shall indicate the deferred due date of the final installment and any uncollected portion of the deferment interest. The account record shall also show the original principal of the loan excluding the charge, the amount of the charge, the face amount of the note including the charge, and any additional charge made for extra days in the first installment period.

d) When a loan is prepaid in full, the account record shall show the date of prepayment, the amount paid to discharge the loan, the amount of the rebate on the finance charge, if any, and any deduction from the rebate for previously earned but uncollected delinquency, default or deferment charges.

e) When a loan is prepaid in full, the amount of any unearned insurance premium for every policy shall be recorded on the account record.

f) If payment is made in any other way than in the ordinary course of business, it shall be so designated. (For example, payment by a third party, insurance claim or sale of security.)
g) If loan receivables are sold to another person the individual account record for such receivables shall show the name of the authorized person to whom sold and the date of such sale.

h) No erasures whatsoever shall be made in the payment and charge sections of any account record. In case of error, a line shall be drawn in ink through the improper entry and the correct entry made on the following line. The entries on the record shall correspond with the receipts given the obligor.

i) Every licensee shall preserve the records of all loans, including the account record, for at least two years after making the final entry for such loan.

(Source: Amended at 30 Ill. Reg. ______, effective ____________)

Section 110.40  File of Original Papers

a) Files

1) A separate file shall be maintained for each obligor and shall contain the note, security agreement, or financing statement, wage assignment, acknowledged copy of the disclosure statement of loan, insurance certificate, a separately signed statement indicating the borrower has received a copy of right to rescind (if required), or waiver, if any, and all other evidence of indebtedness or security pertaining to the loan, except when said documents are in the custody of a court or of an agent for collection, or are hypothecated as herein provided. Evidence of disclosure must be retained for two years from the date of the loan. Where prior written approval has been obtained from the Department, a licensee may maintain these files in any medium or format which accurately reproduces original documents or papers.

2) When an obligor is also a co-maker or obligor on another loan, the file of such obligor shall be cross-referenced to the other, unless such cross-reference is included on the alphabetical record required by Section 110.60.

b) All legal instruments bearing evidence of indebtedness taken in connection with a loan and executed by an obligor including the disclosure statement of loan shall bear the loan number.
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c) No licensee shall offer to or accept from an obligor any instruments that contain blank terms. All spaces or sections not used in the preparation of legal documents shall be ruled out or designated as "none", or "n/a", and any amendments to closed-end contracts shall be signed by the obligor and creditor.

d) The name and address of the licensee making the loan shall appear on any note, wage assignment, security agreement or other legal instrument taken from an obligor, before the proceeds of the loan are delivered.

(Source: Amended at 30 Ill. Reg. ______, effective ____________)

Section 110.50  Cash Book

a) All receipts and disbursements of any amount whatsoever shall be entered, on the day they occur, in the cash book or equivalent record. Separate headings shall be provided for payments on principal and interest and for fees collected from obligors for filing, recording and releasing security agreements, financing statement for perfecting a lien on a motor vehicle, or for amounts received for any type of insurance coverage. In the case of precomputed loans, payments applied to the note may be shown as a total sum and need not be itemized between principal and precomputed charges. Additional charges collected for delinquency shall be itemized or otherwise separately indicated.

b) The cash book shall show all fees paid by the licensee for filing, recording and releasing security agreements, for financing statements or for perfecting a lien on a motor vehicle, and the actual date of payment.

c) The cash book shall be a permanent record of all details of income and disbursements, including all entries to individual accounts of borrowers.

(Source: Amended at 30 Ill. Reg. ______, effective ____________)

Section 110.60  Alphabetical Record of Co-Makers, Obligors or Guarantors

The alphabetical record shall show the account number and the name of each co-maker, obligor, or guarantor who is currently indebted to the licensee, together with sufficient information to locate the account record.

(Source: Amended at 30 Ill. Reg. ______, effective ____________)
Section 110.65 Permanent File

Each licensee must maintain a permanent file which includes the following:

a) A copy of all correspondence sent to or received from the Division within the past 24 months.

b) A copy of the last two examination exception reports and any related correspondence.

c) A copy of the Act and a copy of this Part.

(Source: Amended at 30 Ill. Reg. ______, effective ____________)

Section 110.70 Payments

a) All payments shall be credited on the account record as of the date received. Interest charges, as provided by the Act, shall be collected only from the date the proceeds of the loan are delivered to or expended on behalf of the obligor, even though the note shall bear a prior date.

b) When the finance charge is precomputed, the receipt for each payment shall show the date of payment, the amount applied to the balance of the loan and the amount applied to any other charges permissible under the Act. Payments shall be applied in the order in which they become due.

c) The receipt for each payment on a simple interest account shall show the date of payment, amount applied to interest, amount applied to insurance, amount applied to principal, the balance due on the account, and any amount of interest earned but not collected.

d) When a payment is made in cash, the licensee shall give a receipt to the obligor. A receipt is not required for payment by check or money order unless requested by the obligor.

(Source: Amended at 30 Ill. Reg. ______, effective ____________)

Section 110.80 Simple Interest Loans
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a) No payment shall be accepted on the principal balance unless interest is paid to date or is agreed to by the licensee, except a payment may be credited to principal if there is not sufficient to pay the interest due for one day.

b) A calendar month is the period from a given date in one month to the same numbered date in the following month, and if there is no same numbered date in the following month, to the last day of the following month.

c) Interest shall be computed on the basis of one month's interest for each calendar month and $\frac{1}{30}$ of a month's interest for each day in a fraction of a month or, alternatively, $\frac{1}{365}$ of the agreed annual rate for each day actually elapsed.

d) When a simple interest loan contract is renewed or refinanced, accrued, but uncollected, interest may be included in the principal amount of the new loan contract.

e) A non-standard payment schedule with irregular times or amounts and varying interest rates is permissible, in accordance with Section 15(e)(3) of the Act, providing there is proper disclosure of an independently verifiable index beyond the control of the licensee.

(Source: Amended at 30 Ill. Reg. _______, effective ____________)

Section 110.90 Cancellation and Return of Documents

The contract and promissory note executed by the obligor bearing evidence of indebtedness shall be cancelled and returned to the obligor promptly following the renewal or paid in full date. Where prior written approval has been obtained from the Division Department and original documents are not available, a licensee shall substitute copies reproduced from any medium or format which accurately reproduces the original documents. On renewal, continuing security agreements may be retained until subsequent loans are paid in full. If an executed copy of a legal document is retained following payment in full or renewal, it must be clearly marked "PAID", "CANCELLED" or "RENEWED", indicating the date of payment or renewal. Copies clearly identified with the legend "COPY NOT NEGOTIABLE", or similar language, may be used in lieu of this requirement.

(Source: Amended at 30 Ill. Reg. _______, effective ____________)
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Section 110.100  Finance Charges – Rebates and Delinquency Charges

a)  Computation of Finance Charge

1) Charges may be computed on the original face amount of the loan contract for the full term of the loan contract at the agreed rate.

2) The maximum charge so computed (or any lesser amount) may be added to the original principal amount of the loan or may be deducted from the face amount of the contract when the loan is made.

b)  A standard payment schedule is one under which a loan is repayable in substantially equal and consecutive monthly installments of principal and charge(s) combined, and the first installment is due one month from the date of the note, except as provided in subsections (b)(1) and (2) below.

1) The loan contract shall be drawn to reflect a standard payment schedule with payments to be made on a calendar month basis, except that the first installment period may exceed one month by as much as 15 days. If a charge is made for extra days in the first installment period it may be added to the first installment payment. The interest for such period may be increased by $\frac{1}{30}$ of the agreed monthly rate for each extra day. A charge for extra days in the first installment period does not change the amount of rebate required for prepayment in full on or after the first installment date.

2) If the first installment period is less than one month the loan charge shall be reduced by $\frac{1}{30}$ of the agreed monthly rate for each day that the first installment period is less than one month, and the amount of the first installment shall be reduced by the same amount. Such adjustment in the first installment period does not change the amount of rebate required for prepayment in full on or after the first installment date.

c)  The obligor shall have the right to prepay a loan in full on any installment due date. When prepayment in full occurs on a date other than a scheduled installment due date, the rebate may be computed as of the next following scheduled installment due date.

d)  When the contract is renewed or refinanced before maturity, or judgment is obtained before maturity, the same rebate is required as for prepayment in full.
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e) The Rule of 78ths shall be the method of rebating precomputed contracts. The rebate shall be that proportion of the original charge for the loan which the sum of the monthly balances scheduled to follow such prepayment in full bears to the sum of all the monthly balances, both sums to be determined according to the originally contracted payment schedule. The required rebate is a fraction (or percentage) of the precomputed interest charge. The fraction differs for each number of months that the contract is prepaid in full.

f) When a precomputed interest loan contract is renewed or refinanced, accrued but uncollected interest may be included in the principal amount of the new loan contract.

g) Delinquency or Default Charges

1) All delinquency charges (Default Charges) shall comply with the requirements and provisions of the applicable statute under which the contract was made.

2) Delinquency charges may be assessed and collected and added to the balance of the note, but interest shall not be collected on said charge.

3) Earned, but uncollected, delinquency charges shall be recorded on the account record on the date the delinquent payment is received, if the licensee intends to collect the charges at a later date.

h) If two or more installments are delinquent on any installment date the contract balance may be reduced as of such date by the rebate which would be required for prepayment in full on such date. Thereafter, the agreed contractual rate may be charged on the actual unpaid balances of the loan contract until the contract is fully paid. Interest so received shall be in lieu of the rebated charges and any delinquency charge which would otherwise accrue after the date of which the rebate was made.

i) When a contract is prepaid in full, a statement or receipt shall be given to the obligor, showing the date of prepayment, the amount of the rebate, if any, and the amount paid to discharge the loan.

j) Fifteen days after the expiration date of the loan contract interest may be charged at the contractually agreed rate on any balance remaining unpaid. At the time of
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final payment the licensee shall notify the obligor of the balance unpaid.

k) Deferment

1) The maximum amount which may be charged for a one month's deferment is equal to the difference between the rebate that would be required for prepayment in full as of the scheduled due date of the deferred installment and the rebate which would be required for prepayment in full as of one month prior to said date.

2) On a precomputed loan the rebate for prepayment in full after deferment interest has been charged shall be larger than the rebate which otherwise would be required.

3) If a rebate is required one month or more before the deferred due date of the first deferred installment, the licensee, at its option, may make a separate rebate of deferment interest for each unexpired month of the deferment period and then rebate the standard precomputed finance charge for the number of months to the original final installment date, plus one month for each month that deferment is retained.

(Source: Amended at 30 Ill. Reg. ______, effective ____________)

Section 110.110 Hypothecation at the Time of the Sale of Obligor's Notes

a) A licensee may pledge, hypothecate or sell a note made under the provisions of the Act without the prior approval of the Director provided that said transaction is with another licensee under the Act, Sales Finance Agency Act, a bank, savings bank, savings and loan association or credit union created under the laws of this State or the United States and that the following conditions are satisfied:

1) the licensee notifies the Division in writing within ten days of the transaction indicating the name of the purchaser/pledgee, location where the related notes can be examined and that the licensee shall be responsible for all examination costs.

2) the licensee will provide the Division with an executed agreement entered into by the licensee and the purchaser/pledgee authorizing the Director to conduct an examination of these notes.
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b) All pledges, hypothecations or sales to entities other than those listed in subsection (a) of this Section require the prior approval of the Director.

c) Each instrument hypothecated must bear the following endorsement:

"This instrument is non-negotiable in form but may be pledged as collateral security. If so pledged, any payment made to the payee, either of principal or of interest, upon the debt evidenced by this obligation, shall be considered and construed as a payment on this instrument, the same as though it were still in the possession and under the control of the payee named herein; and the pledgee holding this instrument as collateral security hereby makes said payee its agent to accept and receive payments hereon, either of principal or of interest."

d) The licensee shall keep in the licensed office a record or list of all account records of all loans sold to another affiliated or non-affiliated licensee at the time of the sale. The account shall be maintained in such file until examined and released by the examiner. This record or list shall indicate the date of transaction, account name and number, and the names of the other buyer in the transaction.

(Source: Amended at 30 Ill. Reg. ______, effective _____________)

Section 110.120 Legal Forms

| a) Submission to the DivisionDepartment |
| 1) All forms of notes, security agreements or assignments of wages or other forms used in connection with the making of loans shall be submitted to the DivisionDepartment prior to the conduct of the business in the licensed location; provided, however, where the licensee or affiliate is engaged in the same business and licensed by this DivisionDepartment, the use of forms in the new location identical to those being used in the existing location shall not require filing. Notice of intent to use identical forms (change of name excepted) should be provided the DivisionDepartment by the licensee. |
| 2) Should the licensees at any time following submission of forms modify the forms previously submitted, the forms as modified shall be submitted to the DivisionDepartment. |
b) Standard forms approved by the Division shall be used in the following cases:

1) Application for original license.
2) Application for annual renewal of license.
3) Change of location.
4) Annual Report.
5) Appointment of attorney-in-fact for service of process.
6) Bond.

(Source: Amended at 30 Ill. Reg. ______, effective ____________)

Section 110.130 Judgments

a) When a note has been reduced to judgment, the face of the account record shall show the amount and date of the judgment. When judgment is taken on a precomputed loan before maturity, the same rebate of interest is required that would be required for prepayment in full on the date of the entry of judgment.

b) All payments received shall be applied to the judgment balance and be properly identified. The rate of interest charged on a judgment balance must comply with current applicable statutes. No higher rate of interest or charge shall be assessed or accepted.

c) The files of the licensee shall contain statements setting forth the following items:

1) Date of judgment.
2) Copy of the judgment.
3) Date suit was filed.
4) Amount of the judgment.
5) The amount of principal and the amount of interest for which judgment is
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taken.

6) In the case of a precomputed loan, the unpaid balance of note, the rebate of interest, subtracted therefrom, the resulting balance, plus the amount of any interest included in the judgment.

d) Court costs charged to the obligor shall be itemized and verified by receipts.

e) Where property is foreclosed or sold pursuant to any judgment or judicial process, the file must contain a copy of the decree or judicial sale.

f) If records related to the judgment are kept off-site, the licensee shall make these documents available from that site or return the records to the licensed location within 72 hours after the Division's Department's request.

(Source: Amended at 30 Ill. Reg. ______, effective ____________)

Section 110.140 Sale of Security

The following regulations shall be observed in the sale of security:

a) The account record shall give the following information:

1) When possession of the security was obtained, and whether by voluntary or involuntary action.

2) Public or private sale and date sold.

3) When part or all of the security is sold, the fact must be noted on the account record.

4) All credits from proceeds of the sale must be properly identified (whether by sale of security, etc.).

b) The files of the licensee shall contain:

1) Evidence of compliance by licensee with all applicable provisions of the Uniform Commercial Code in the sale and disposition by a secured party of collateral after default including copies of all notices directed to the obligor as required therein or as required by any other law, statute or
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regulation, state or federal.

2) Copy of notice of intended sale which must contain notice of default, balance owing, date, place and time of public sale or the date after which a private sale may occur. Such notice must be forwarded to the obligor by certified mail to the last known address of the obligor.

3) Signed receipts from the purchasers or auctioneer describing the collateral purchased, showing the amount paid for same and the name of the obligor who executed the security agreement, and, if a private sale, copies of any competitive bids.

4) Copy of statement of final accounting, original of which shall be sent to the obligor after the sale, which statement shall set forth the sale price of the collateral, itemization of the costs of sale, and the deficiency balance due on the account.

5) A report of condition of the collateral at the time of retaking.

c) No waiver of the provisions of the Uniform Commercial Code safeguarding the rights of the obligor shall be accepted by a licensee prior to default.

d) When the collateral is abandoned and the address of the obligor is unknown, notice of sale and statement of final accounting shall be sent to the last known address by registered or certified mail, return receipt requested.

e) The following form or its equivalent shall be used when collateral is sold:

DATE ________________________________
STATE ______________________ CITY ________________________________

This is to acknowledge that the undersigned did purchase from ________________________________ creditor, under the terms of a certain security agreement executed by ________________________________ and ________________________________ on the _____ day of ________________________________, 2019, the following described goods and collateral:

(enumerate articles)
f) In connection with the sale of collateral given as security for loans after default, the licensee shall make only such charges for expense incurred as are permitted by the applicable provision of the Uniform Commercial code which charges must be reasonable, taking into consideration the nature of the collateral, the circumstances surrounding the sale, the fair market value of the collateral and the amount of the indebtedness. Such charges must be substantiated by paid receipts.

(Source: Amended at 30 Ill. Reg. ______, effective ____________)

Section 110.150 Trouble File

A separate and complete file shall be kept containing all records pertaining to judgments, foreclosures, repossessions, death claims and sales. The record shall be filed alphabetically under the name of the obligor or by account number.

(Source: Amended at 30 Ill. Reg. ______, effective ____________)

Section 110.160 Lien Charges

a) All official fees paid for the purpose of perfecting or releasing a security interest in property given as collateral for a loan may be collected by a licensee from the obligor.

b) As a prerequisite for a loan, the licensee may require the prospective obligor to provide evidence of ownership and condition of title as a prerequisite for a loan.

(Source: Amended at 30 Ill. Reg. ______, effective ____________)

Section 110.170 Insurance

a) Licensees may provide insurances to the obligor provided the obligor has indicated in a specific, dated and separately signed statement that he or she desires the insurance coverage. The purchase of any policy of insurance from or through the licensee shall not be a condition precedent to a loan. Such insurance shall comply with the Illinois Insurance Code and all lawful requirements of the Director of the Department of Financial and Professional Regulation-Division of Insurance related to that insurance thereto.
b) The licensee may provide joint credit life or joint credit accident and health insurance if both insureds are obligated for the loan; however, this coverage shall not be a requirement precedent to the extension of credit.

c) When a loan is prepaid in full the obligor shall receive a refund of the insurance charges. The required refund shall be computed according to the Rule of 78ths or the Sum of the Digits Method. When the refund of any insurance premium is less than $1.00, no refund is required.

d) It shall be the licensee's responsibility to explain clearly to the obligor the benefits and limitations of any insurance requested in connection with any loan or loan extensions thereof.

e) The licensee shall also deliver or cause to be delivered to the obligor a copy of the policy, or policies, certificate, or other evidence thereof at the time the loan is made, and all obligors shall sign and receive a copy of a separate agreement clearly and conspicuously disclosing the limits of coverage.

f) No obligor shall be required to purchase any policy of insurance from any certain company, agent, broker or person as a condition precedent to a loan. No licensee shall decline new or existing insurance that is approved by the Department of Financial and Professional Regulation-Division of Insurance, or prevent any obligor from obtaining such insurance from any other source.

g) When the loan is made, the insurance charges shall be computed for no more than the term of the loan contract on an amount which does not exceed the total amount required to pay the combined total of principal and interest charges.

h) The obligor's estate shall be paid the amount due between the unpaid balance and the insurance benefit paid. Evidence of this payment shall be maintained by the licensee.

i) In the case of a precomputed contract, the amount of the net unpaid balance shall be the unpaid balance of the note unless any required rebate for prepayment in full on the date of the borrower's death, plus accrued but unpaid delinquency charges. In the case of a simple interest contract, the amount of the net unpaid balance shall be the principal balance plus accrued interest to the date of the borrower's death.
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j) The licensee shall keep in its office a separate record of all accounts on which death claims have been paid. The account records shall indicate the date of death and the refunds of interest or loan charges and unearned insurance premiums paid to the estate. The refund check or voucher shall be available on demand.

k) Insurance against loss or damage to real or personal property given as security for a loan or liability arising out of ownership may be required of an obligor.

l) Property insurance provided by a licensee shall be consistent with the amount and term of the loan and shall not extend beyond the maturity of the loan unless the loan is delinquent, when it may be extended 30 days beyond the original expiration date without charge to the obligor(s).

m) Upon cancellation of the loan by prepayment, renewal or refinancing, the obligor(s) shall be entitled to a refund not less than the unearned premium based on the Rule of 78ths in any amount exceeding $1.00.

n) The licensee or affiliate may receive compensation for the sale of any insurance or debt cancellation contract or other such product purchased pursuant to the loan made or held by the licensee, provided the licensee discloses to the obligor that either the licensee or an affiliate may receive something of value in connection with the purchase by the obligor. This must be prominently disclosed in the loan contract.

(Source: Amended at 30 Ill. Reg. ______, effective ____________)

Section 110.180 Office and Office Hours

Every licensee shall maintain a place of business to which the general public shall have free access and where all obligations entered into shall be payable.

a) Except as provided in subsection (c) below, or otherwise authorized by the Division, each licensed office shall be open not less three consecutive hours between 8:00 A.M. and 6:00 P.M. on every business day, except Saturdays, Sundays and legal holidays, during the term of the license, and the licensee shall file with the Division a schedule of the hours during which it elects to keep such office open, provided that any licensee may keep its office open for any period it sees fit in addition to the hours listed in such schedule.

b) Whenever a licensee desires to change the schedule of hours during which its
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office shall remain open then on file with the Division, it may do so upon filing with the Division a schedule setting forth such change of time at least three days before such change shall go into effect. The schedule of hours shall be prominently displayed in the place of business of the licensee.

c) If any payment of principal or interest, or both, shall be due on any obligations to such licensee on any closed day, then such payment shall be considered for all purposes, including the computation of interest, as having been received on the closed day, if such payment shall be received, whether through the mail or otherwise, at any time before the close of business on the next regular business day following the closed day.

d) The license of each licensee and the Annual License Fee Renewal Certificate shall be prominently displayed and be made available for easy reading by the public in the place of business of the licensee.

(Source: Amended at 30 Ill. Reg. ______, effective ____________)

Section 110.190 Advertising

a) Licensees shall not advertise "No co-makers required", "No endorsers required", "Signature only" loans, "Loans made on your plain note" or the like, unless such loans constitute at least 50% of all loans made by the licensee.

b) Licensees shall not make reference in any form of advertising such as newspapers, circulars, letters, radio, or other media, to "Low rates", or "Lower rates", or "Lowest rates", or "Lowest cost", or to indicate by direct or indirect means through such expression as "Low cost", "Lower cost", or "Easier to repay", or by any device that the charges for a loan are low.

c) Licensees may advertise "New reduced rates" or "Reduced rates", or similar phrases for not more than 60 days after the effective date of the reduction in rates.

d) Upon specific request by the Division, licensees shall forward to the Supervisor of the Consumer Credit Division the complete text of all advertising copy, whether printed or broadcast, for which questions have been raised concerning compliance with the Act.

e) A licensee may indicate in advertising and otherwise that its business is
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"regulated" or "examined" or "supervised" or "licensed" by the State of Illinois. A licensee may not advertise in a false, misleading or deceptive manner or imply or indicate that the rates or charges for loans made are "approved", "set" or "established" by the State of Illinois. [205 ILCS 670/18]

f) Should any advertisement by a licensee state the amount of any installment payment, dollar amount of any finance charge or number of installments, or period of repayment, the advertisement shall comply with the provisions of the Consumer Credit Protection Act and the regulations applicable to that Act.

g) Any statement of the payment schedule for a loan in an advertisement must show the proceeds of the loan exclusive of the finance charge and indicate the number and amount of the monthly installments required to pay the loan contract. The total of the installments must be sufficient to pay the total of the proceeds and finance charge for the loan according to the payment schedule. When a payment schedule is used, it must disclose the Annual Percentage Rate for each amount of loan advertised, using that term.

h) If the advertisement includes an offer of insurance, the advertisement must disclose the type of insurance offered and whether or not the installments include the cost of the insurance.

i) The licensee shall not advertise the conduct of business other than at the license location or other location approved by the Director.

j) On a finding that an advertisement is false, misleading or deceptive, the Director may issue a cease and desist order.

(Source: Amended at 30 Ill. Reg. ______, effective ____________)

Section 110.200 Other Business

Unless otherwise authorized by the Act, no other business may be conducted at the licensed location unless authorized in writing by the Director. The Director's authorization will be predicated upon the licensee's agreeing to the following:

a) That the authorization will not conceal nor facilitate concealment of an evasion of the Act;

b) To comply with any State or federal statute or regulation;
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c) To obtain any license or registration required by a federal, State or local government agency to engage in the other business authorized;

d) That the Department may examine all records and investigate any or all transactions of the licensee;

e) The Director retains the right, upon notice and opportunity to be heard, to alter, amend or revoke another business authorization;

f) That, if any federal or State statute or regulation enacted after the authorization thereafter prohibits the activity, the authorization shall become null and void immediately;

g) At the time of making such request for the authorization, the licensee shall pay to the Director a nonrefundable Other Business Authorization Request fee of $100;

h) At the time of renewing the annual license, the licensee shall pay to the Director the sum of $25 for each Other Business Authorization. Regardless of the number of licensed locations, only one fee per Other Business Authorization is required to be remitted.

(Source: Amended at 30 Ill. Reg. ______, effective ____________)

Section 110.210 Examination Remittances

a) Licensees shall forward all examination remittances to the Department of Financial Institutions, at any address designated by the Director.

b) All fees and charges shall be remitted in the form of a check, draft or money order to the order of the Director of the Division of Financial Institutions.

(Source: Amended at 30 Ill. Reg. ______, effective ____________)

Section 110.215 Document Preparation Fee

A licensee may assess the obligor a document preparation fee not to exceed $25. This fee may be assessed for consummated loans only and shall be itemized and disclosed in the loan contract as prescribed under the provisions of the Truth-in-Lending Act. In the event of prepayment in
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full, no portion of this fee is required to be refunded.

(Source: Amended at 30 Ill. Reg. _______, effective ____________)

Section 110.220 Credit Practices

No licensee, while collecting or attempting to collect an alleged debt, shall engage in any of the following acts:

   a) Using or threatening to use force, violence or physical harm to an obligor, his family or his property;

   b) Threatening arrest or criminal prosecution when no basis for such action lawfully exists;

   c) Threatening the seizure, attachment and sale of an obligor's property when such action can only be taken pursuant to court order, unless disclosure is made that prior court proceedings are required;

   d) Disclosing or threatening to disclose information adversely affecting an obligor's reputation for credit worthiness with knowledge or reason to know such information is false;

   e) Threatening to initiate or initiating communication with an obligor's employer unless there has been a default in the payment of the obligation and at least 5 days prior written notice is given to the last known address of the obligor of the intent to communicate with the employer and except as expressly permitted by statute or court order;

   f) Communicating or threatening to communicate with an obligor or his family with such unreasonable frequency as to constitute harassment, or at times reasonably considered to be unusual hours or known to be inconvenient;

   g) Using profane, obscene or abusive language with an obligor or his family;

   h) Disclosing or threatening to disclose information relating to an obligor's indebtedness to any other person, except when such other person has a legitimate business need for the information;

   i) Disclosing or threatening to disclose information concerning the existence of a
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| debt which the licensee knows to be reasonably disputed by the obligor without disclosing the fact that the debt is disputed; |
| j) Attempting or threatening to attempt enforcement of a right or remedy with knowledge or reason to know that the right or remedy does not exist; |
| k) Use of any form of communication simulating legal or judicial process that gives the appearance of being authorized, issued or approved by a governmental agency, official or attorney at law when it is not; |
| l) Use of badges, uniforms, or other indicia of any governmental agency or official except as authorized by law; |
| m) Misrepresenting the amount of the debt alleged to be owed; |
| n) Representing that an alleged debt may be increased by the addition of attorney's fees, investigation fees or any other fees or charges when there is no contractual or statutory authorization for such addition. |

(Source: Amended at 30 Ill. Reg. ______, effective __________)
Section 110.230  General

a) A wage assignment may be taken from any employed obligor. An "obligor", as the word is used in this Part, includes co-makers or sureties as well as the person actually receiving the money.

b) No person who himself is an obligor of a licensee may become a surety or co-maker for one or more obligors of the same licensee, if the obligor's direct or contingent liability is in excess of maximum principal amounts specified in Section 15 of the Act.

c) Notary fees shall not be charged to or collected from the obligor.

d) Examination of Records

1) The Division Department may examine all records and investigate any or all transactions in the office of the licensee and shall charge the licensee $400 for each examiner day or portion of an examiner day thereof.

2) The examination of the books and records of the licensee may be conducted concurrently with the examination of any other business conducted by the licensee that is regulated or licensed by the Division Department. A separate charge shall be made for each examiner day or portion of an examiner day thereof.

3) The Division Department may conduct an examination for the purpose of verifying that the licensee has taken necessary actions to correct violations of the Act and/or this Part related rules and shall charge the licensee $550 for each examiner day or portion of an examiner day thereof, when the Director determines the verification examination must be performed on site at any facility of the licensee.

e) No penalty charge other than provided by the Act or this Part the rules and regulations under the Act shall be imposed by the licensee in the event of prepayment of the principal of the obligation, in whole or in part.

f) For the purpose of any reports required by the Division Department, expenses of all businesses conducted in the licensed office shall be allocated to each such business at the end of each year. The Division Department shall require
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information as to all such business in the licensee's annual report.

g) Loans secured by real estate made under this Act shall disclose on the face of the contract that the loan is being made pursuant to the Consumer Installment Loan Act.

(Source: Amended at 30 Ill. Reg. ______, effective ____________)

Section 110.235 Relocation

a) Whenever a licensee desires to change the licensed place of business to a location other than that set forth in the license and the proposed site is 15 miles or less from the current location, the licensee shall provide the Division with the following at least ten days prior to the relocation:

1) A written notice providing the complete address of the new location;

2) Photographs of both the exterior and interior of the new location;

3) A written sworn statement that the new location will not share the premises with that of another business and the exact distance in miles between the existing location and new location;

4) A relocation fee of $300; and

5) The original license for endorsement.

b) A relocation in excess of 15 miles requires the prior approval of the Director in addition to the information required in subsection (a) of this Section.

(Source: Amended at 30 Ill. Reg. ______, effective ____________)

Section 110.236 Name Change

Whenever the licensee desires to amend the name of the licensed business, the licensee shall submit to the Division, within 15 days after amending the name, the following:

a) $300 amended name change fee.

b) Amended Articles of Incorporation, if the licensee is a corporation.
c) Amended organization papers, if the licensee is an entity other than a corporation.

(Source: Amended at 30 Ill. Reg. _______, effective _____________)

Section 110.240 Hearing Procedures

a) Hearings
After receipt of a written request for a hearing, the Director shall send to the respondent requesting the hearing, by certified mail, at least 10 days prior to the date set for such hearing, a Notice of Hearing. The Notice shall include the date and the time and place of the hearing to review the propriety of any administrative actions made pursuant to the Act.

b) The Director may designate, in writing, a Hearing Officer who shall have the minimum qualification of being licensed to practice law in Illinois. The Hearing Officer may be disqualified for bias or conflict of interest. The Hearing Officer shall have the authority to:

1) Examine or permit examination of any witness under oath;
2) Determine the order of appearance of all parties;
3) Receive all evidence and testimony and rule on its admissibility, as well as require the production of any relevant document or witness;
4) Rule on objections to evidence;
5) Make a written report with recommendations to the Director, which shall include findings of fact and conclusions of law. Findings of fact shall be based exclusively on the evidence and on matters officially noticed; and
6) Require any party or his or her attorney to provide proposed findings of fact or conclusions of law for consideration in the report.

c) General Provisions

1) Delivery of notice shall be deemed complete when the notice is deposited in the United States mail.
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2) **Continuances**

   A) A continuance shall be granted for good cause by the Hearing Officer, which shall be:

   i) In writing and signed by the respondent or his or her attorney and shall state the reasons for the request.

   ii) Delivered to the Hearing Officer at least three days prior to the scheduled hearing.

   B) For the purposes of this subsection (c)(2), good cause shall require the respondent to demonstrate real and compelling need for additional time. It shall include but not be limited to illness, service in the armed forces, etc.

3) The respondent shall bear all the costs of the hearing.

4) A court reporter shall be present and considered as part of the costs of the hearing.

d) Conduct of Hearings

1) The Hearing Officer shall open the hearing by presenting for the record his or her letter of authorization from the Director.

2) The rules of evidence and privilege as applied in civil cases in the Circuit Courts of this State shall be followed. The Hearing Officer may admit evidence not admissible under such rules if such evidence may be relevant to the case.

3) The Hearing Officer may, on his or her own motion or the motion of one of the parties, take notice of matters of which the Circuit Courts of this State may take judicial notice. Notice may be taken of generally recognized technical or scientific facts within the Division's specialized knowledge if parties are notified, before or during the hearing, and shall be afforded an opportunity to contest the material so noticed. The burden of opposing any material admitted upon notice shall be upon the opposing party so opposing.
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4) Failure of the respondent to attend the hearing shall result in dismissal of the respondent's petition and an entry of a default against the respondent. Within 30 days from dismissal of the respondent's petition, the respondent may petition the Hearing Officer for reconsideration if the respondent can establish that his or her failure to attend was caused by events beyond his or her control and he or she exercised due diligence to attend or seek a continuance.

5) The record of any hearing shall include:

   A) All pleadings, and evidence received, whether admitted or excluded;
   B) A statement of all matters officially noticed;
   C) All offers of proof, objections and rulings on that proof and those objections thereon;
   D) All proposed findings and exceptions;
   E) Any decision, opinion, or report by the Hearing Officer;
   F) Any evidence excluded by the Hearing Officer, even though such evidence is not used in the determination of the claim;
   G) A proceeding transcript which shall be recorded by such means as to adequately ensure the preservation of the testimony.

6) Within 60 days after the hearing or the receipt of all necessary documents, the Hearing Officer shall report to the Director as required by subsection (b)(5), pursuant to this section.

7) Within 30 days after receiving the report of the Hearing Officer, the Director shall issue this decision which shall be served on the respondent by registered or certified mail, return receipt requested. Copies of the Hearing Officer's report to the Director are available upon written request.

e) Petition to Reconsider
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1) Within 30 days after receipt of the Director's decision, the respondent may petition the Director for reconsideration based upon a verified petition. An affidavit shall accompany the petition stating that the decision was against the preponderance of the evidence, was contrary to law, or was arbitrary or capricious, or is affected by newly discovered evidence not in existence at the time of the initial hearing or that which could not have been discovered using due diligence at that time.

2) The Director shall determine within 15 days whether to reconsider the case. If the Director determines after reading the affidavit that one or more of the findings listed in subsection (e)(1) has been alleged by the respondent, a hearing may be held and shall be limited to only those issues raised in the petition to reconsider. If reconsideration is denied, the Director's initial decision shall be the final administrative decision of the Department.

(Source: Amended at 30 Ill. Reg. ______, effective ____________)

Section 110.250 Limited Purpose Branch

A licensee applying for a limited purpose branch shall submit to the Division the following:

a) A written application in the form prescribed by the Director.

b) Fee as prescribed by the Act.

c) Photograph of proposed site and a description of the location, including any other business which is conducted there.

d) Written statements:

1) that no other activity shall be conducted at the site, including but not limited to accepting payments, servicing the accounts, or collections; and

2) that the proposed site shall not be within 1,000 feet of a facility operated by an inter-track wagering licensee or an organization licensee subject to the Illinois Horse Racing Act of 1975, or riverboat subject to the Riverboat Gambling Act, or within 1,000 feet of the location at which the riverboat docks.
Section 110.260 Off-Site Records

With the Director's prior written approval, the licensee may retain records at a location other than the licensed location. The licensee shall make a written request that shall include the following:

a) Address of off-site location.

b) Contact person and telephone number at the off-site location.

c) Statement that all books, records and account information shall be made available within 72 hours after the Division's request at either the licensed location or the off-site location.

d) At the Director's discretion, the examination may be conducted at either the licensed location or the off-site location.

e) The licensee will pay for all examination expenses.

(Source: Amended at 30 Ill. Reg. ______, effective ____________)

Section 110.265 Servicing of Accounts by Contract

Upon prior approval of the Director, the licensee may contract for servicing of accounts. A request for the Director's approval shall be in writing and include the following:

a) Name and address of proposed servicer;

b) Executed contract, conditioned upon approval by the Director, between licensee and servicer;

c) Contact person and telephone number of the servicer;

d) A statement that the licensee will make all books, records, and account information readily available for examination by the Division.
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e) A statement that the licensee will pay all examination expenses; and

f) Written consent of servicer for the Division to conduct its examination.

(Source: Amended at 30 Ill. Reg. ______, effective ____________)

Section 110.270 Revocation or Suspension of License

If it is determined that the Director had the authority to issue the suspension or revocation of a license pursuant to Section 9 of the Act, he or she may issue orders as may be reasonably necessary to correct, eliminate or remedy the situation.

(Source: Amended at 30 Ill. Reg. ______, effective ____________)

SUBPART B: SHORT TERM LENDING

Section 110.300 Definitions

"Check" shall mean a check, draft or other negotiable instrument used for the payment of money.

"Interest bearing loan" shall mean a loan in which interest is charged upon the principal amount borrowed.

"Refinance" shall mean to renew or extend a loan beyond its original term.

"Short-term lender" shall mean any lender engaged in making any short-term loans.

"Short-term loan" means a loan upon which interest is charged at an annual percentage rate exceeding 36 percent and for a term of not more than 30 days in the case of a non-title-secured loan or for a term not more than 60 days in the case of a title-secured loan.

"Title-secured loan" shall mean a loan in which, at commencement, an obligor provides to the licensee, as security for the loan, physical possession of the obligor's title to a motor vehicle.
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(Source: Amended at 30 Ill. Reg. _______, effective ____________)

Section 110.310 Applicability of Rule

This The rules contained in this Subpart B, as well as those contained in Subpart A, shall apply to any short-term lender as defined in Section 110.300 of this Part.

(Source: Amended at 30 Ill. Reg. _______, effective ____________)

Section 110.320 Application for License

In addition to the licensing requirements of Section 110.15 of this Part, a short-term lender making application for license shall provide, as part of the application submitted to the Division Department, a statement certifying compliance with any and all applicable local ordinances pertaining to the applicant's proposed business.

(Source: Amended at 30 Ill. Reg. _______, effective ____________)

Section 110.330 Renewal of License

At the time of renewal of a license, and in addition to paying the fees and complying with the other requirements of the Act, a short-term lender must submit a statement certifying compliance with any and all applicable local ordinances pertaining to the licensed business.

(Source: Amended at 30 Ill. Reg. _______, effective ____________)

Section 110.340 Simple Interest

A short-term lender must compute interest on all short-term loans as simple interest, as defined in Section 110.80 of this Part.

(Source: Amended at 30 Ill. Reg. _______, effective ____________)

Section 110.350 Release of Lien

a) A short-term lender that secures the loan by a title to a motor vehicle must immediately take into possession the registered title evidencing the obligor's ownership in the motor vehicle and shall note on the face of the loan agreement the vehicle's make, model, year of manufacture, and vehicle identification number.
b) Within 24 hours after payment in full of the amount due under the agreement, the licensee must release any filed or recorded liens, provide evidence of the release of lien to the obligor, and return the title to the obligor or cause the title to be returned to the obligor. If payment has been made by a personal or business check, the licensee may delay the release of lien or return of title by 5 business days for the purpose of confirming availability of funds.

(Source: Amended at 30 Ill. Reg. ______, effective ____________)

Section 110.360 Availability of Debt Management Services

a) Before entering into a short-term loan agreement, licensee must give to the obligor a pamphlet, approved by the Director, describing the availability of debt management services and the obligor's rights and responsibilities in the transaction.

b) Each short-term loan agreement and refinancing agreement executed by a licensee shall include a statement, which shall be initialed by the obligor, as follows: "I have received from (name of lender) a toll free number from the Department of Financial and Professional Regulation-Division Financial Institutions that I can call for information regarding debt management services."

c) At the time a short-term lender conveys any written notice to an obligor indicating the obligor is in arrears or that the obligor is in default, the lender shall include with the notice a statement indicating a toll free number of the Division Department of Financial Institutions that the obligor may contact for the purpose of the obligor receiving information from the Division Department regarding debt management services. The form and method of providing the information shall be subject to approval of the Division Department.

(Source: Amended at 30 Ill. Reg. ______, effective ____________)

Section 110.370 Lending Limits and Refinancing

a) A short-term loan that is not title-secured may not exceed $400 in principal amount. A short-term title-secured loan may not exceed $2,000 in principal amount. However, no loan shall be made in such amount that the principal and interest payments for the stated duration of the loan exceed 50% of the obligor's gross income for that period.
DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION

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b) A short-term loan may be refinanced a maximum number of 2 times, but only when the outstanding balance of the loan has been reduced by at least 20%. If a short-term loan is secured by a post-dated check, the post-dated check must name the lender as payee.

c) No loan, other than the refinancing of an existing short-term loan, may be made to an obligor who has had an outstanding short-term loan within the preceding 15 days.

d) The loan agreement must include a separate statement signed by the obligor attesting that the obligor has not had an outstanding short-term loan within the preceding 15 days. The lender shall further verify the statement by means of any database created by or approved by the Director for that purpose.

e) The loan agreement shall advise the obligor that matters involving improprieties in the making of the loan or in loan collection practices may be referred to the Division and shall prominently disclose the Division's address and telephone number.

f) Each short-term loan refinancing agreement executed by a licensee shall include a statement, which shall be initialed by the obligor, as follows: "I have received from (name of lender) a toll free number from the Department of Financial Institutions that I can call for information regarding debt management service."

(Source: Amended at 30 Ill. Reg. _____, effective ____________)

Section 110.380 Second Notice

At the time a short-term lender conveys a second notice to an obligor indicating the obligor is in arrears or any notice that the obligor is in default for a debt issued by the lender under the Act, the licensee shall include with the notice a statement indicating a telephone number of the Division that the obligor may contact for the purpose of the obligor receiving information from the Division regarding debt management services for assisting the obligor. The form and method of the notice provided by lenders shall be subject to approval by the Director.

(Source: Amended at 30 Ill. Reg. _____, effective ____________)
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Section 110.390 Possession of Vehicle

a) Unless otherwise provided for in the loan agreement, a lender shall not take or retain possession of the keys (or a copy of the keys) to a motor vehicle used to secure a title-secured loan.

b) No short-term lender may take possession of a vehicle without first giving notice to the obligor; affording the obligor the opportunity to make the vehicle available to the lender at a place, date and time reasonably convenient to the lender and obligor; and permitting the obligor to remove any personal belongings from the vehicle without charge or additional cost to the obligor.

c) Possession measures shall be in accordance with Section 19.1 of the Act.

d) No short-term lender may take possession of a motor vehicle for a loan default and lease the vehicle back to the obligor.

(Source: Amended at 30 Ill. Reg. _____, effective ____________)

Section 110.400 Loan Proceeds

A lender must issue the proceeds of a short-term loan in the form of a check drawn on the licensee's bank account, in cash, or by money order. When the proceeds are issued in the form of a check drawn on the lender's bank account or by money order, the lender may not charge a fee for cashing the check or money order if cashing service is offered at the location. When the proceeds are issued in cash, the lender must provide the obligor with a written verification of the cash transaction and shall maintain a record of the transaction.

(Source: Amended at 30 Ill. Reg. _____, effective ____________)

Section 110.410 Security Interest

A short-term lender shall not take a security interest in any of the obligor's property other than the check or the obligor's motor vehicle title, as tendered to the lender at the time of the making of the loan.

(Source: Amended at 30 Ill. Reg. _____, effective ____________)

SUBPART B: MORTGAGE LENDING
Section 110.500 Definitions (Repealed)

"Approved Credit Counselor" means a credit counselor as approved by the Director of the Department of Financial Institutions.

"Good faith" means honesty in fact in the conduct of the transaction.

"Home equity loan" means any loan secured by the borrower's primary residence where the proceeds are not used as purchase money for the residence.

"Points and fees" means:

all items required to be disclosed as points and fees under 12 CFR 226.32 (2000, no subsequent amendments or editions included);

the premium of any single premium credit life, credit disability, credit unemployment, or any other life or health insurance that is financed directly or indirectly into the loan;

all compensation paid directly or indirectly to a mortgage broker, including a broker that originates a loan in its own name in a tablefunded transaction, not otherwise included in 12 CFR 226.4.

"Subject loan" is the term used to describe any loan to which this Subpart applies pursuant to Section 110.505 of this Part.

"Total loan amount" is the same as the term used in 12 CFR 226.32, and shall be calculated in accordance with the Federal Reserve Board's Official Staff Commentary to that regulation.

(Source: Repealed at 30 Ill. Reg. ______, effective ____________)

Section 110.505 Applicability of Rule (Repealed)

This Subpart shall apply to a home equity loan in which:

a) At the time of origination, the APR exceeds by more than 6 percentage points in the case of a first lien mortgage, or by more than 8 percentage points in the case of a junior mortgage, the yield on U.S. Treasury securities having comparable periods of maturity to the loan maturity as of the fifteenth day of the month
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immediately preceding the month in which the application for the loan is received by the lender; or

b) The total points and fees payable by the consumer at or before closing will exceed the greater of 5% of the total loan amount or $800. The $800 figure shall be adjusted annually on January 1 by the annual percentage change in the Consumer Price Index.

However, these rules shall not apply to a loan that is made primarily for a business purpose unrelated to the residential real property securing the loan and to an open-end credit plan subject to 12 CFR 226 (2000, no subsequent amendments or editions are included).

(Source: Repealed at 30 Ill. Reg. _______, effective ____________)

Section 110.510 Good Faith Requirements (Repealed)

a) Any disclosure or action required by this Subpart shall be made in good faith.

b) No lender shall accept a fee or charge for a subject loan application unless the licensee is able to demonstrate to the Director that, if its subject loan requirements are met, there is a reasonable likelihood that a loan commitment will be issued for such loan for the amount, term, rate, charges and other conditions set forth in the loan application and the applicable disclosures and documents required and that the loan has a reasonable likelihood of being repaid by the applicant.

c) A lender who has accepted an application for a subject loan shall make a good faith effort to process the application within the time specified in the loan application.

(Source: Repealed at 30 Ill. Reg. _______, effective ____________)

Section 110.515 Fraudulent or Deceptive Practices (Repealed)

a) No lender shall employ fraudulent or deceptive acts or practices in the making of a subject loan, including deceptive marketing and sales efforts.

b) No lender shall make a subject loan that includes a penalty provision for prepayment made:

1) after the expiration of the 36 month period following the date the loan was
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made; or

2) that is more than:

A) 3% of the total loan amount, if the prepayment is made within the first 12 month period following the date the loan was made; or

B) 2% of the total loan amount, if the prepayment is made within the second 12 month period after the date the loan was made; or

C) 1% of the total loan amount, if the prepayment is made within the third 12 month period following the date the loan was made.

(Source: Repealed at 30 Ill. Reg. ______, effective ____________)

Section 110.520 Prohibited Refinances (Repealed)

No lender shall refinance any subject loan, where such refinancing charges additional points and fees, within a 12 month period after the original loan agreement was signed, unless the refinancing results in a financial benefit to the borrower.

(Source: Repealed at 30 Ill. Reg. ______, effective ____________)

Section 110.525 Negative Amortization (Repealed)

No lender shall make a subject loan, other than a loan secured only by a reverse mortgage, with terms under which the outstanding balance will increase at any time over the course of the loan because the regular periodic payments do not cover the full amount of the interest due, unless the negative amortization is the consequence of a temporary forbearance sought by the borrower.

(Source: Repealed at 30 Ill. Reg. ______, effective ____________)

Section 110.530 Negative Equity (Repealed)

No lender shall make a subject loan where the loan amount exceeds the value of the property securing the loan, plus reasonable closing costs not to exceed 5% of the total loan amount.

(Source: Repealed at 30 Ill. Reg. ______, effective ____________)

Section 110.535 Balloon Payments (Repealed)
No lender shall make a subject loan that contains a scheduled final payment that is more than twice as large as the average of earlier scheduled monthly payments unless such balloon payment becomes due and payable at least 15 years after the loan's origination. This prohibition does not apply when the payment schedule is adjusted to account for the seasonal or irregular income of the borrower or if the purpose of the loan is a "bridge" loan connected with the acquisition or construction of a dwelling intended to become the borrower's principal dwelling.

(Source: Repealed at 30 Ill. Reg. _____, effective ____________)

Section 110.540 Financing of Certain Points and Fees (Repealed)

No lender shall make a subject loan that finances points and fees in excess of 6% of the total loan amount.

(Source: Repealed at 30 Ill. Reg. _____, effective ____________)

Section 110.545 Financing of Single Premium Insurance Products (Repealed)

No lender shall make a subject loan, which finances a single premium credit life, credit disability, credit unemployment, or any other life or health insurance, directly or indirectly. Insurance previously calculated and paid on a monthly basis shall not be considered to be financed by the lender.

(Source: Repealed at 30 Ill. Reg. _____, effective ____________)

Section 110.550 Lending Without Due Regard to Ability to Repay (Repealed)

No lender shall make a subject loan if the lender does not believe at the time the loan is consummated that the borrower or borrowers will be able to make the scheduled payments to repay the obligation based upon a consideration of their current and expected income, current obligations, employment status and other financial resources (other than the borrower's equity in the dwelling that secures repayment of the loan). A borrower shall be presumed to be able to repay the loan if, at the time the loan is consummated, or at the time of the first rate adjustment in the case of a lower introductory interest rate, the borrower's scheduled monthly payments on the loan (including principal, interest, taxes, insurance and assessments), combined with the scheduled payments for all other disclosed debts, do not exceed 50% of the borrower's monthly gross income.

(Source: Repealed at 30 Ill. Reg. _____, effective ____________)
Section 110.555 Verification of Ability to Repay (Repealed)

No lender shall make a subject loan prior to verifying the borrower's ability to repay the loan. Such verification shall require, at a minimum, the following:

a) The borrower prepares and submits to the lender a personal income and expense statement in a form prescribed by the Director.

b) Income is verified by means of tax returns, pay stubs, accounting statements or other prudent means.

c) A credit report is obtained regarding the borrower.

(Source: Repealed at 30 Ill. Reg. ______, effective ____________)

Section 110.560 Payments to Contractors (Repealed)

No lender shall make a payment of any proceeds of a subject loan to a contractor under a home improvement contract other than:

a) by instrument payable to the borrower or jointly to the borrower and the contractor; or

b) at the election of the borrower, by a third party escrow agent in accordance with the terms established in a written agreement signed by the borrower, the lender, and the contractor before the date of payment.

(Source: Repealed at 30 Ill. Reg. ______, effective ____________)

Section 110.565 Counseling Prior to Perfecting Foreclosure (Repealed)

a) In the event that a subject loan becomes delinquent by more than 30 days, the lender shall send a notice advising the borrower of the availability of consumer credit counseling.

b) The notice required under subsection (a) shall, at a minimum, include the following language notice:

"YOUR LOAN IS OR WAS MORE THAN 30 DAYS PAST DUE. YOU MAY
BE EXPERIENCING FINANCIAL DIFFICULTY. IT MAY BE IN YOUR BEST INTEREST TO SEEK APPROVED CONSUMER CREDIT COUNSELING. A LIST OF APPROVED CREDIT COUNSELORS MAY BE OBTAINED FROM THE DEPARTMENT OF FINANCIAL INSTITUTIONS AT 1-888-298-8089."

e) If, within 15 days after mailing the notice provided for under subsection (b), a lender or its agent is notified in writing by an approved consumer credit counselor that the borrower is seeking approved consumer credit counseling, then the lender and its agent shall not institute legal action under Part 15 of Article XV of the Code of Civil Procedure for 30 days from the date of that notice. Only one such 30-day period of forbearance is allowed under this Section per subject loan.

d) If within the 30-day period provided under subsection (c), the lender or its agent, the approved consumer credit counselor, and the borrower agree to a debt management plan, then the lender and its agent shall not institute legal action under Part 15 of the Article XV of the Code of Civil Procedure for so long as the debt management plan is complied with by the borrower.

1) The agreed debt management plan must be in writing and signed by the lender or its agent, the approved consumer credit counselor, and the borrower. The lender or its agent, the approved consumer credit counselor, and the borrower may modify the debt management plan.

2) Upon written notice to the lender or its agent, the borrower may change approved consumer credit counselors.

e) If the borrower fails to comply with the agreed debt management plan, then nothing in this Subpart shall be construed to impair the legal right of the lender or its agent to enforce contracts or mortgage agreements.

f) This Section applies only to subject loans as defined in Section 110.500.

(Source: Repealed at 30 Ill. Reg. ______, effective ____________)

Section 110.570 Mortgage Awareness Program (Repealed)

a) The Mortgage Awareness Program is a counseling and educational program that is provided by the Director.
b) The minimum requirements for the core curriculum of the Mortgage Awareness Program shall include:

1) Explanation of the amount financed;
2) Explanation of the finance charge;
3) Explanation of the annual percentage rate;
4) Explanation of the total payments;
5) Explanation of the loan costs including broker's fees, finance charges, points, origination fees and all other charges and fees;
6) Explanation of any right of rescission;
7) Explanation of foreclosure procedures;
8) Explanation of the debt ratio, including total debt to income ratio, loan debt to income ratio, and loan debt to value of residence;
9) Explanation of adjustable rate mortgage;
10) Explanation of balloon payments;
11) Explanation of credit options;
12) Explanation of each item that appears on the good faith estimate;
13) Explanation of pre-payment penalties.

c) Counseling session attendees must also complete a personal income and expense statement, as well as a balance sheet, on forms provided by the Director.

d) Prior to issuing a certificate of completion, counselors shall privately meet and discuss with each attendee that attendee's income and expense statement and balance sheet, as well as the terms of any loan the attendee currently has or its contemplating.

e) Counseling session attendees must also be provided with a brochure that contains
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information covered by the Mortgage Awareness Program.

(Source: Repealed at 30 Ill. Reg. ______, effective ____________)

Section 110.575 Offer of Mortgage Awareness Program (Repealed)

a) Any lender, prior to making a subject loan, shall inform the borrower in writing of the right to participate in the Mortgage Awareness Program.

b) No lender shall offer less favorable loan terms to a borrower due to a borrower's participation in a Mortgage Awareness Program.

e) The borrower may waive participation in the program, provided that such waiver occurs no less than 2 business days after the day that the borrower receives the written notice required by subsection (a) and that such waiver is in writing in a form approved by the Director.

(Source: Repealed at 30 Ill. Reg. ______, effective ____________)

Section 110.580 Third Party Review (Repealed)

In the case of each subject loan, upon approval of the loan application, the lender shall advise the borrower in writing of the opportunity to seek independent review of the loan terms in order to determine affordability of the loan. When and if the General Assembly appropriates adequate funding to the Department of Financial Institutions specifically for this program:

a) Every borrower who chooses to participate in the independent review provided in this subpart shall submit information requested on the worksheets outlined in Appendix A and B.

b) The Department shall provide the borrower with a review of the worksheets and inform the borrower of the amount the borrower has available for a monthly mortgage payment based upon the borrower's budget. The Department shall also provide a projection of the payments required under the terms of the loan based upon a review of loan information pertaining to balloon payments, adjustable interest rates and other items disclosed by the loan documents affecting the amount of payment.

e) The borrower shall receive a copy of the completed forms and shall sign the forms acknowledging receipt. A copy of the written and signed forms shall be
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submitted to the lender prior to the closing of the loan and shall become a part of the permanent file for the loan.

d) If, based upon the review, the borrower determines that the loan is not in his or her best economic interest, the reviewer shall so note this in the completed forms sent to the lender. This determination shall enable the borrower to withdraw from the contemplated loan with no financial penalty.

(Source: Repealed at 30 Ill. Reg. _____, effective ___________)

Section 110. APPENDIX A Estimated Monthly Income and Expenses Worksheet

**ESTIMATED MONTHLY INCOME:**

1. Paycheck (Net/"Take Home") $ _________
2. Interest/Dividends
3. Social Security/Pension
4. Alimony/Child Support
5. Other
6. Total Estimated Monthly Income $ _________
   (Add Lines 1 through 5)

**ESTIMATED MONTHLY EXPENSES:**

7. Mortgages/Rent $ _________
8. Homeowner's/Renter's Insurance
9. Real Estate Taxes
10. Water & Sewer
11. House Repairs
12. Groceries
13. Telephone
14. Gas (House)
15. Electric
16. Credit Cards
17. Car Payments
18. Car Insurance
19. Licenses (Car)
20. Gas (Car)
21. Car Repairs/Maintenance
22. Clothing
23. Medical/Dental
24. Medical Insurance
25. Prescriptions
26. Loan Payments
   (Not included in Line 2 or 17)
27. Tuition
28. Contribution
<table>
<thead>
<tr>
<th></th>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>29.</td>
<td>Cellular Telephone</td>
<td></td>
</tr>
<tr>
<td>30.</td>
<td>Pager</td>
<td></td>
</tr>
<tr>
<td>31.</td>
<td>Recreation/Vacation</td>
<td></td>
</tr>
<tr>
<td>32.</td>
<td>Other Insurance (Life, etc.)</td>
<td></td>
</tr>
<tr>
<td>33.</td>
<td>Income Taxes</td>
<td></td>
</tr>
<tr>
<td>34.</td>
<td>Alimony/Child Support</td>
<td></td>
</tr>
<tr>
<td>35.</td>
<td>Transportation</td>
<td></td>
</tr>
<tr>
<td>36.</td>
<td>Miscellaneous</td>
<td></td>
</tr>
<tr>
<td>37.</td>
<td>Other</td>
<td></td>
</tr>
<tr>
<td>38.</td>
<td>Total Estimated Monthly Expenses</td>
<td>$ _______</td>
</tr>
<tr>
<td></td>
<td>(Add Lines 7 through 37)</td>
<td></td>
</tr>
<tr>
<td>39.</td>
<td>Excess/Deficit</td>
<td>$ _______</td>
</tr>
<tr>
<td></td>
<td>(Subtract Line 38 from Line 6)</td>
<td></td>
</tr>
</tbody>
</table>

*If Line 38 is greater than Line 6, your estimated monthly expenses exceed your estimated monthly income.*

_________________________
Borrower's Signature

(Source: Repealed at 30 Ill. Reg. _______, effective ____________)
Section 110. **APPENDIX B**  Mortgage Ratio Worksheet (Repealed)

**Part I**

**LOAN-TO-VALUE RATIO**

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Mortgage Amount(s)</td>
<td>$ __________</td>
</tr>
<tr>
<td>2. Appraised Value</td>
<td>$ __________</td>
</tr>
<tr>
<td>3. Line 1 divided by Line 2</td>
<td>__________</td>
</tr>
</tbody>
</table>

Note: This is the Percentage of the purchase price appraised value of your home that will be allocated to your total mortgage. A percentage rate over 80% may result in you incurring additional costs.
**Part II**

**INCOME RATIO**

**MONTHLY HOUSING EXPENSES:**

<table>
<thead>
<tr>
<th></th>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Principal and Interest Payment</td>
<td>$ ______</td>
</tr>
<tr>
<td>2.</td>
<td>Homeowner's Insurance</td>
<td>______</td>
</tr>
<tr>
<td>3.</td>
<td>Real Estate Tax</td>
<td>______</td>
</tr>
<tr>
<td>4.</td>
<td>Mortgage Insurance Premium</td>
<td>______</td>
</tr>
<tr>
<td>5.</td>
<td>Homeowner's Assoc.-Fee</td>
<td>______</td>
</tr>
<tr>
<td>6.</td>
<td>Ground Rents</td>
<td>______</td>
</tr>
<tr>
<td>7.</td>
<td>Payments on Existing or Proposed 2nd-Mortgage</td>
<td>______</td>
</tr>
<tr>
<td>8.</td>
<td>Total Housing Expense (Add Lines 1 through 7)</td>
<td>$ ______</td>
</tr>
<tr>
<td>9.</td>
<td>Gross Salary</td>
<td>$ ______</td>
</tr>
<tr>
<td>10.</td>
<td>Dividend/Interest</td>
<td>______</td>
</tr>
<tr>
<td>11.</td>
<td>Social Security/Pension</td>
<td>______</td>
</tr>
<tr>
<td>12.</td>
<td>Alimony/Child Support</td>
<td>______</td>
</tr>
<tr>
<td>13.</td>
<td>Other</td>
<td>______</td>
</tr>
<tr>
<td>14.</td>
<td>Total Gross Income</td>
<td>$ ______</td>
</tr>
<tr>
<td>15.</td>
<td>Divide Line 8 by Line 14</td>
<td>______</td>
</tr>
</tbody>
</table>

*Note: This is the percentage of your gross monthly income that will be allocated*
DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION

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to your mortgage expenses.
Part III

LONG-TERM DEBT RATIO

MONTHLY EXPENSES:

1. Total Housing Expenses (Part II, Line 8) $ _________

2. Credit Cards

3. Car Payments

4. Loans
   (Not Included on Line 1 or Line 3)

5. Alimony/Child-Support

6. Total Expenses
   (Lines 1 through 5) $ _________

MONTHLY INCOME:

7. Total Gross Income
   (Part II, Line 14) $ _________

8. Divided Line 6 by Line 7

Note: This is the percentage of your gross monthly income that will be allocated to your mortgage expenses and other debt that you pay on a monthly basis.

Borrower’s Signature

(Source: Repealed at 30 Ill. Reg. ______, effective ___________)
NOTICE OF PROPOSED AMENDMENT

1) **Heading of the Part:** Medical Payment

2) **Code Citation:** 89 Ill. Adm. Code 140

3) **Section Numbers:** Proposed Action: 140.569 Amendment

4) **Statutory Authority:** Section 12-13 of the Illinois Public Aid Code [305 ILCS 5/12-13]

5) **Complete Description of the Subjects and Issues Involved:** Under these proposed amendments, the Department's Exceptional Care Program will be gradually phased out. Current residents who are enrolled in the Program will continue to be covered by the Exceptional Care Program rate for as long as they meet the qualification requirements. However, no new Exceptional Care clients will be enrolled. Instead, services for clients will be paid through the Minimum Data Set (MDS) based reimbursement system for nursing facilities. Six new categories of services are being added to the MDS system, for exceptional care purposes, in a related proposed rulemaking at 89 Ill. Adm. Code 147.

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 proposed amendments pending on this Part?** Yes

<table>
<thead>
<tr>
<th>Section</th>
<th>Proposed Action</th>
<th>Illinois Register Citation</th>
</tr>
</thead>
<tbody>
<tr>
<td>140.442</td>
<td>Amendment</td>
<td>October 28, 2005 (29 Ill. Reg. 16151)</td>
</tr>
<tr>
<td>140.464</td>
<td>Amendment</td>
<td>October 14, 2005 (29 Ill. Reg. 15424)</td>
</tr>
</tbody>
</table>

10) **Statement of Statewide Policy Objectives:** This rulemaking does not affect units of local government.

11) **Time, Place, and Manner in Which Interested Persons May Comment on this Proposed Rulemaking:** Any interested parties may submit comments, data, views, or arguments concerning this proposed rulemaking. All comments must be in writing and should be addressed to:

    Joanne Scattoloni  
    Office of the General Counsel, Rules Section  
    Illinois Department of Healthcare and Family Services
DEPARTMENT OF HEALTHCARE AND FAMILY SERVICES

NOTICE OF PROPOSED AMENDMENT

201 South Grand Avenue East, Third Floor
Springfield, Illinois  62763-0002

(217) 524-0081

The Department requests the submission of written comments within 30 days after the publication of this Notice. The Department will consider all written comments it receives during the first Notice period as required by Section 5-40 of the Illinois Administrative Procedure Act [5 ILCS 100/5-40].

Any interested persons may review these proposed amendments on the Internet at http://www.dpaillinois.com/publicnotice/ Access to the Internet is available through any local public library. In addition, the amendments may be reviewed at the Illinois Department of Human Services’ local offices (except in Cook County). In Cook County, the amendments may be reviewed at the Office of the Director, Department of Healthcare and Family Services, 100 West Randolph Street, Suite 10-300, Chicago, Illinois. The amendments may be reviewed at all offices Monday through Friday from 8:30 a.m. until 5:00 p.m. This notice is being provided in accordance with federal requirements at 42 CFR 447.205.

12) Initial Regulatory Flexibility Analysis:

A) Types of small businesses, small municipalities and not-for-profit corporations affected: Medicaid funded nursing facilities will be affected.

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: This rulemaking amendments was not included on either of the two most recent agendas because: This rulemaking was inadvertently omitted when the most recent regulatory agenda was published.

The full text of the Proposed Amendment begins on the next page:
DEPARTMENT OF HEALTHCARE AND FAMILY SERVICES

NOTICE OF PROPOSED AMENDMENT

TITLE 89: SOCIAL SERVICES
CHAPTER I: DEPARTMENT OF HEALTHCARE AND FAMILY SERVICES
SUBCHAPTER d: MEDICAL PROGRAMS

PART 140
MEDICAL PAYMENT

SUBPART A: GENERAL PROVISIONS

Section 140.1 Incorporation By Reference
140.2 Medical Assistance Programs
140.3 Covered Services Under Medical Assistance Programs
140.4 Covered Medical Services Under AFDC-MANG for non-pregnant persons who are 18 years of age or older (Repealed)
140.5 Covered Medical Services Under General Assistance
140.6 Medical Services Not Covered
140.7 Medical Assistance Provided to Individuals Under the Age of Eighteen Who Do Not Qualify for AFDC and Children Under Age Eight
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SUBPART E: GROUP CARE

Section 140.569 Clients With Exceptional Care Needs

a) Exceptional Care Program

1) Effective July 1, 2006, Exceptional Care services shall be covered under the MDS-based reimbursement methodology as described in 89 Ill. Adm. Code 147.Table A. Any resident who qualifies for the Department's Exceptional Care Program, as defined in this Section, as of June 30, 2006, shall be reimbursed at the rate in effect for that resident on June 30, 2006.
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This shall continue until the resident is no longer eligible for the Exceptional Care category for that resident. Department reviews shall continue on these residents every 90 days.

A) During the 90 day reviews, any resident who qualifies for the Department's Exceptional Care Program as of June 30, 2006 and who becomes eligible for a different Exceptional Care category of service will be changed to the rate for the new category, provided that the facility has an existing contract with the Department to provide that category of service.

B) No new residents will be accepted into the Department's Exceptional Care Program after adoption of this Section. When a facility no longer has any Exceptional Care residents, the Department will terminate the facility's Exceptional Care contract. New Exceptional Care contracts and amendments to existing Exceptional Care contracts will not be accepted by the Department after adoption of this amended Section.

C) The Minimum Data Sets (MDS) for existing Exceptional Care residents will not be used to determine the facility's nursing rate from 89 Ill. Adm. Code 147.Table A.

2) Pursuant to Section 5-5.8a of the Illinois Public Aid Code [305 ILCS 5/5-5.8a], the Department may make payments for exceptional care services to nursing facilities ("providers") that meet licensure and certification requirements as may be prescribed by the Department of Public Health and are enrolled in and meet participation requirements of the Medical Assistance Program pursuant to Sections 140.11 and 140.12.

3) Exceptional medical care is defined as the level of care with extraordinary costs related to services which may include physician, nurse, ancillary specialist services, and medical equipment and/or supplies that have been determined to be a medical necessity. This shall apply to Medicaid patients who are being discharged from the hospital or other setting where Medicaid reimbursement is at a rate higher than the exceptional care rate for related services or to persons who are in need of exceptional care services who would otherwise be in an alternative setting at a higher cost to the Department and Medicaid eligible residents transitioning from Medicare to Medicaid while in the nursing facility. This includes but is not limited to head-injured persons, ventilator dependent persons or persons
b) Exceptional Care Requirements

The Department may enter into agreements with providers for the provision of exceptional care services only if the provider agrees to the following terms:

1) The provider will maintain separate records regarding costs related to the care of the exceptional care residents.

2) The provider must demonstrate the capacity and capability to provide exceptional care as documented by Department of Public Health and Department of Healthcare and Family Services Public Aid records, including, but not limited to, being free of finalized Department of Public Health findings (exhaustion of appeals process with deficiencies remaining) after January 1, 1997, that the provider has deficiencies related to substandard quality of care during the period of time since the last standard certification survey or imposition of a conditional license.

3) The provider must maintain and provide documentation demonstrating:

   A) Adherence to staffing requirements as set out in subsection (c) of this Section;

   B) Adherence to staff training requirements as set out in subsection (d) of this Section;

   C) Validity of written agreements as required in subsection (e) of this Section;

   D) Presence of emergency policy and procedures as set out in subsection (f) of this Section;
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E) Medical condition of the resident; and

F) Care, treatments and services provided to the resident.

4) The provider must have and maintain physical plant adaptations to accommodate the necessary equipment, such as an emergency electrical backup system.

c) Exceptional Care Staffing Requirements

Staffing requirements for providers of exceptional care include:

1) A minimum of one RN on duty on the day shift, seven days per week (as required by the Department of Public Health in 77 Ill. Adm. Code 300.1240 or 250.910(e) and (f)(1) as appropriate). Additional RN staff may be determined necessary by the Department of Healthcare and Family Services, based on the Department's review of the exceptional care services needs;

2) A minimum of the required number of LPN staff (as required by the Department of Public Health in 77 Ill. Adm. Code 300.1230 and 300.1240 or 250.910(e) and (f)(1) as appropriate), on duty, with an RN on call, if not on duty on the evening and night shifts, seven days per week; and

3) For those providers of complex respiratory or ventilator services under the exceptional care program, a certified respiratory therapy technician or registered respiratory therapist, on staff or on contract with the provider.

d) Training Requirements for Providers of Exceptional Care for Ventilator Dependent Residents

1) At least one of the full-time professional nursing staff members must have successfully completed a course in the care of ventilator dependent individuals and the use of ventilators, conducted and documented by a certified respiratory therapy technician or registered respiratory therapist or a qualified registered nurse who has at least one year experience in the care of ventilator dependent persons.

2) All staff caring for ventilator dependent residents must have documented inservice training in ventilator care prior to providing such care. Inservice training must be conducted at least annually by a certified respiratory therapy technician or registered respiratory therapist or a qualified
registered nurse who has at least one year experience in the care of ventilator dependent persons. Inservice training documentation shall include name and qualification of the inservice director, duration of presentation, content of presentation and signature and position description of all participants.

e) Exceptional Care Agreement Requirements
The provider must have a valid written agreement with:

1) A medical equipment and supply provider which must include a service contract for ventilator equipment when accepting ventilator dependent residents;

2) A local emergency transportation provider;

3) A local hospital capable of providing the necessary care for equipment dependent residents, when appropriate; and

4) A certified respiratory therapy technician or registered respiratory therapist (unless a respiratory therapist is on staff within the facility), when accepting ventilator dependent residents or residents requiring respiratory therapy services.

f) Exceptional Care Emergency Policy and Procedures Requirements
The provider must have specific written policies and procedures addressing emergency needs for residents requiring exceptional care.

g) Accessibility to Records
The provider must make accessible to HFSIDPA and/or IDPH all provider, resident and other records necessary to determine that the needs of the resident are being met and to determine the appropriateness of exceptional care services.

h) Provider Approval Process

1) A provider shall notify the Department, in writing, of its interest in participating in the Exceptional Care Program.

2) If approved by the Department, a written exceptional care agreement with the provider shall be executed. Such agreements are separate and distinct from the provider agreements specified in Section 140.11(a)(6) and are not subject to the provisions regarding notice and right to hearing in the event
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3) Providers desiring to discontinue providing exceptional care shall notify the Department, in writing, at least 60 days prior to the date of termination. Payment for exceptional care residents already residing in facilities which notify the Department that they wish to discontinue providing exceptional care services will remain at the previous exceptional care rate as long as the resident meets exceptional care criteria and as long as all related criteria are met by the provider as determined by the Department's utilization review (see Monitoring, subsections (k)(2) and (3) of this Section) or the resident is discharged.

4) It is the responsibility of the provider to effect appropriate discharge planning for exceptional care residents when terminating services for exceptional care. The Department agrees to assist providers with any information available regarding appropriate placement settings.

5) The Department may terminate a provider's agreement, for any reason, upon 60 days written notice to the provider. Reasons for which the Department may terminate an agreement include, but are not limited to, Department of Public Health findings that the provider has deficiencies related to substandard quality of care or imposition of a conditional license.

i) Determining Eligibility for Exceptional Care Payment

1) A person being discharged from a hospital or those who are in another setting must be approved by an authorized Department representative prior to placement in a facility to be eligible for exceptional care payment.

2) In order for a person to be approved for exceptional care reimbursement, the cost of the person's care must be at least 50% more than the proposed admitting provider's Medicaid per diem rate (capital, support and nursing components). Eligible items which may be used in computing the cost of the resident's care include nursing services costs, therapy services costs, and medical equipment and supply costs. Computations for determining cost of care shall be based upon costs for services, medical equipment and supplies for the proposed admitting provider as determined by the Department.

j) Provision for Hospital Patients for which a Long Term Care Placement is
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Unavailable
In the event placement for a patient in need of exceptional care services or skilled nursing services cannot be located, the Department shall approve payment to the hospital in which the patient is receiving services at a rate not to exceed the average Statewide long term care provider per diem for the level of services provided.

k) Monitoring

1) All utilization controls applied to exceptional care by the Department in accordance with the approved plan for medical services under the Illinois Public Aid Code [305 ILCS 5/5-2], and Title XIX of the Federal Social Security Act (42 U.S.C. 1396a) shall continue to apply to exceptional care provided under the Exceptional Care Program described in the Health Finance Reform Act [20 ILCS 2215/3-5].

2) The Department shall provide for a program of delegated utilization review and quality assurance. The Department may contract with Medical Peer Review organizations to provide utilization review and quality assurance.

3) The Department shall review exceptional care residents' utilization of services every 90 days. A review may be waived by the Department if one or more previous assessments show that a resident's condition has stabilized. However, two consecutive reviews shall not be waived. Department staff will maintain contact with the long term care provider regarding the resident's condition during the time period any assessment is waived.

4) In the event that it is determined that the resident is no longer in need of or receiving exceptional care services, the Department shall discontinue the exceptional care payment rate for the resident and reduce the rate of payment to the provider to the provider's standard Medicaid per diem rate.

(Source: Amended at 30 Ill. Reg. ______, effective ____________)
1) **Heading of the Part:** Reimbursement for Nursing Costs for Geriatric Facilities

2) **Code Citation:** 89 Ill. Adm. Code 147

3) **Section Numbers:**
   - 147.125  Amendment
   - 147.150  Amendment
   - 147.175  Amendment
   - 147.200  Amendment
   - Table A  Amendment

4) **Statutory Authority:** Section 12-13 of the Illinois Public Aid Code [305 ILCS 5/12-13]

5) **Complete Description of the Subjects and Issues Involved:** These proposed amendments concerning reimbursement for nursing facilities provide a number of changes to the Minimum Data Set (MDS) based reimbursement system to more clearly identify the needs of nursing facility residents and related services. The changes are the result of discussions the Department has participated in with the three major nursing home associations. Discussions focused on improving the MDS clinical tool, found in the rules at Section 147. Table A, which is used to derive the nursing component of nursing facility rates. A study of over 1,000 residents in nursing facilities Statewide was also conducted to assess whether the current MDS clinical tool adequately reflects the care being provided.

The proposed effective date for these changes is June 30, 2006. This proposed rulemaking is not expected to result in additional expenditures.

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 proposed amendments pending on this Part?** No

10) **Statement of Statewide Policy Objectives:** This rulemaking does not affect units of local government.

11) **Time, place, and manner in which interested persons may comment on this proposed rulemaking:** Any interested parties may submit comments, data, views, or arguments
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concerning this proposed rulemaking. All comments must be in writing and should be addressed to:

Joanne Scattoloni  
Office of the General Counsel, Rules Section  
Illinois Department of Healthcare and Family Services  
201 South Grand Avenue East, Third Floor  
Springfield, Illinois  62763-0002  
(217)524-0081

The Department requests the submission of written comments within 30 days after the publication of this Notice. The Department will consider all written comments it receives during the first notice period as required by Section 5-40 of the Illinois Administrative Procedure Act [5 ILCS 100/5-40].

Any interested persons may review these proposed amendments on the Internet at http://www.dpaillinois.com/publicnotice/  
Access to the Internet is available through any local public library. In addition, the amendments may be reviewed at the Illinois Department of Human Services' local offices (except in Cook County). In Cook County, the amendments may be reviewed at the Office of the Director, Department of Healthcare and Family Services, 100 West Randolph Street, Suite 10-300, Chicago, Illinois. The amendments may be reviewed at all offices Monday through Friday from 8:30 a.m. until 5:00 p.m. This notice is being provided in accordance with federal requirements at 42 CFR 447.205.

12) Initial Regulatory Flexibility Analysis:

A) Types of small businesses, small municipalities and not-for-profit corporations affected: Medicaid funded nursing facilities will be affected.

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 2005

The full text of the Proposed Amendments begins on the next page:
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## NOTICE OF PROPOSED AMENDMENTS

**TITLE 89: SOCIAL SERVICES**

**CHAPTER I: DEPARTMENT OF HEALTHCARE AND FAMILY SERVICES**

**SUBCHAPTER d: MEDICAL PROGRAMS**

**PART 147**

## REIMBURSEMENT FOR NURSING COSTS FOR GERIATRIC FACILITIES

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Specialized Services for Individuals with Developmental Disabilities in Nursing Facilities

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Section 147.125 Nursing Facility Resident Assessment Instrument

a) Except as specified in subsection (b) of this Section, all Medicaid certified nursing facilities shall comply with the provisions of the current federal Long Term Care Resident Assessment Instrument User's Manual, version 2. (Centers for Medicare and Medicaid Services, 7500 Security Boulevard, Baltimore, Maryland 21244 (December 2005), and the Resident Assessment Instrument-Mental Health Illinois version 2 (July 2003), adopted from Minimum Data Set-Mental Health version 2. This incorporation by reference includes no later amendments or editions.)

b) Nursing facilities shall, in addition, comply with the following requirements:

1) Complete a full Minimum Data Set (MDS) assessment, which includes required items A through R, in addition to any State required items, for each resident quarterly, regardless of the resident's payment source. Facilities are not required to complete and submit the MDS Quarterly Assessment Form. When completing the full MDS assessment for quarterly submittal to the Department, it is not necessary to also complete the Resident Assessment Protocols (RAPs) or Sections T and U. RAPs and Sections T and U is only required with the comprehensive assessment described in the current federal Long Term Care Resident Assessment Instrument User's Manual, which includes assessments shall only be completed at admission, annually, for a significant change or for a significant correction of a prior MDS.

2) Transmit electronically to the State MDS database the MDS for all assessments within 31 days after the completion date of the assessment. Except for nursing facilities that are defined as Class I Institutions for Mental Diseases (IMDs) pursuant to 89 Ill. Adm. Code 145.30, the rate set
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will be based on the MDS received two quarters prior to the rate effective date and MDS not received within 31 days will be given a default rate.

c) While a new rate system referenced in Section 147.150 is under development, Medicaid-certified Class I IMDs shall electronically submit both the MDS pursuant to subsections (a) and (b) of this Section and the Illinois Minimum Data Set-Mental Health (IL MDS-MH) as specified by the Department at the following frequencies:

1) Complete a full IL MDS-MH within 14 days after admission for each resident, regardless of the resident's payment source.

2) Complete a full IL MDS-MH at 90 days after admission for each resident, regardless of the resident's payment source.

3) Complete a full IL MDS-MH at six months after admission for each resident, regardless of the resident's payment source, and every six months thereafter.

4) Transmit electronically to the Department's IL MDS-MH database, the IL MDS-MH for all required assessments within 31 days after the completion date of the assessment.

(Source: Amended at 30 Ill. Reg. _______, effective ____________)

Section 147.150 Minimum Data Set (MDS) Based Reimbursement System

a) Public Act 92-0848 requires the Department to implement, effective July 1, 2003, a payment methodology for the nursing component of the rate paid to nursing facilities. Except for nursing facilities that are defined as Class I Institutions for Mental Diseases (IMDs) pursuant to 89 Ill. Adm. Code 145.30, reimbursement for the nursing component shall be calculated using the Minimum Data Set (MDS). Increased reimbursement under this payment methodology shall be paid only if specific appropriation for this purpose is enacted by the General Assembly. For Class I IMDs, the nursing component shall be the rate in effect on June 30, 2005 until a payment methodology using the Illinois Minimum Data Set-Mental Health (IL MDS-MH), appropriate for the care needs of the IMD resident population, is implemented. The payment methodology using the IL MDS-MH shall be implemented no later than July 1, 2007.
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b) The nursing component of the rate shall be calculated annually and may be adjusted quarterly. The determination of rates shall be based upon a composite of MDS data collected from each eligible resident in accordance with Section 147.Table A for those eligible residents who are recorded in the Department’s Medicaid Management Information System as of 30 days prior to the rate period as present in the facility on the last day of the second quarter preceding the rate period. Residents for whom MDS resident identification information is missing or inaccurate, or for whom there is no current MDS record for that quarter, shall be placed in the lowest MDS acuity level for calculation purposes for that quarter. The nursing component of the rate may be adjusted on a quarterly basis if any of the following conditions are met:

1) Total variable nursing time for a rate quarter as calculated in subsection (c)(1) of this Section exceeds total variable nursing time calculated for the previous rate quarter by more than five percent.

2) Total variable nursing time for a rate quarter as calculated in subsection (c)(1) of this Section exceeds:

A) total variable nursing time as calculated for the annual rate period by more than ten percent;

B) total variable nursing time as recalculated and adjusted for the annual period by more than five percent.

3) Total variable nursing time for a rate quarter as calculated in subsection (c)(1) of this Section declines from the total variable nursing time as calculated for the annual period by more than five percent. No quarterly nursing component rate reduction shall exceed five percent from the previous rate quarter.

c) Per diem reimbursement rates for nursing care in nursing facilities consist of three elements: variable time reimbursement; fringe benefit reimbursement; and reimbursement for supplies, consultants, medical directors and nursing directors.

1) Variable Time Reimbursement. Variable nursing time is that time necessary to meet the major service needs of residents that vary due to their physical or mental conditions. Each need level or specific nursing service measured by the Resident Assessment Instrument is associated with an amount of time and staff level (Section 147.Table A).
Reimbursement is developed by multiplying the time for each service by the wage(s) of the type of staff performing the service except for occupational therapy, physical therapy and speech therapy. If more than one level of staff are involved in delivering a service, reimbursement for that service will be weighted by the wage and number of minutes allocated to each staff type. When a service can be provided by either a registered nurse (RN) or licensed practical nurse (LPN), the wage used will be weighted by the average mix of RNs and LPNs in the sample of facilities used to set rates. In calculating a facility's rate, the figures used by the Department for wages will be determined in the following manner:

A) The mean wages for the applicable staff levels (RNs, LPNs, certified nursing assistants (CNAs), activity staff, social workers), as reported on the cost reports and determined by regional rate area, will be the mean wages.

B) Fringe benefits will be the average percentage of benefits to actual salaries of all nursing facilities based upon cost reports filed pursuant to 89 Ill. Adm. Code 140.543. Fringe benefits will be added to the mean wage.

C) The base wage, including fringe benefits, will then be updated for inflation from the time period for which the wage data are available to the midpoint of the rate year to recognize projected base wage changes.

D) Special minimum wage factor. The process used in subsection (c)(1)(A) of this Section to determine regional mean wages for RNs, LPNs and CNAs will include a minimum wage factor. For those facilities below 90% of the Statewide average, the wage is replaced by 90% of the Statewide average.

E) Effective July 1, 2006, facilities will receive 90% of the funds necessary to fund the nursing component of the rate in effect on June 30, 2006. The remaining appropriation available in the rate period for the nursing component of the rate will be allocated proportionally across all facilities according to the MDS-based reimbursement methodology pursuant to Table A of this Part. On July 1 of each year beginning July 1, 2003, the base wage calculated in subsection (c)(1)(C) of this Section shall be
multiplied by a ratio:

i) The numerator of which is the quotient obtained by dividing the amounts estimated by the Department to be available in the rate period for the nursing component of the rate Statewide by the Department's estimate of the number of patient days Statewide for the rate period eligible for reimbursement from the Department.

ii) The denominator of which shall be the mean Statewide base rate per patient day.

F) Effective July 1, 2007, facilities will receive 75% of the funds necessary to fund the nursing component of the rate in effect on June 30, 2006. The remaining appropriation available in the rate period for the nursing component of the rate will be allocated proportionally across all facilities according to the MDS-based reimbursement methodology pursuant to Table A of this Part.

G) Effective July 1, 2008, facilities will receive 50% of the funds necessary to fund the nursing component of the rate in effect on June 30, 2006. The remaining appropriation available in the rate period for the nursing component of the rate will be allocated proportionally across all facilities according to the MDS-based reimbursement methodology pursuant to Table A of this Part.

H) Effective July 1, 2009, facilities will receive 25% of the funds necessary to fund the nursing component of the rate in effect on June 30, 2006. The remaining appropriation available in the rate period for the nursing component of the rate will be allocated proportionally across all facilities according to the MDS-based reimbursement methodology pursuant to Table A of this Part.

I) Effective July 1, 2010, all appropriated funding available in the rate period for the nursing component of the rate will be allocated proportionally across all facilities according to the MDS-based reimbursement methodology pursuant to Table A of this Part.

2) Vacation, Sick Leave and Holiday Time. The time to be added for vacation, sick leave, and holidays will be determined by multiplying the
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total of Variable Time by 5%.

3) Special Supplies, Consultants and the Director of Nursing. Reimbursement will be made for health care and program supplies, consultants required by the Department of Public Health (including the Medical Director), and the Director of Nursing by applying a factor to variable time and vacation, sick leave and holiday time. (A list of consultants required by the Department of Public Health can be found in 77 Ill. Adm. Code 300.830).

A) Supplies will be updated for inflation using the General Services Inflator (see 89 Ill. Adm. Code 140.551). Health care and program salaries shall be updated for inflation using the Nursing and Program Inflator (see 89 Ill. Adm. Code 140.552). A factor for supplies will be the Statewide mean of the ratio of total facility health care and programs supply costs to total facility health care and programs salaries.

B) The Director of Nursing and the consultants will be updated for inflation using the Nursing and Program Inflator (see 89 Ill. Adm. Code 140.552). A factor for the Director of Nursing and consultant costs shall be the Statewide mean of the ratio of all facilities' Director of Nursing and consultant costs to total facility health care and programs salaries.

C) These costs shall be updated pursuant to cost reports as referenced in 89 Ill. Adm. Code 153.125(f).

d) Determination of Facility Rates.
An amount for each resident will be calculated by multiplying the number of minutes from the assessment by the appropriate wages for each assessment item (see subsection (c)(1) of this Section), adding the amounts for vacation, sick and holiday time (see subsection (c)(2) of this Section), and supplies, consultants, and the Director of Nursing (see subsection (c)(3) of this Section). The average of the rates for eligible residents assessed will become the facility's per diem reimbursement rate for each eligible resident in the facility.

e) A transition period from the payment methodology in effect on June 30, 2003 to the payment methodology in effect July 1, 2003 shall be provided for a period not exceeding June 30, 2006, as follows:
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1) MDS-based rate adjustments under this Section shall not be effective until the attainment of a threshold. The threshold shall be attained at the earlier of either:

A) when all nursing facilities have established a rate (sum of all components) which is no less than the rate effective June 30, 2002, or

B) July 1, 2006.

2) For a facility that would receive a lower nursing component rate per resident day under the payment methodology effective July 1, 2003 than the facility received June 30, 2003, the nursing component rate per resident day for the facility shall be held at the level in effect on June 30, 2003 until a higher nursing component rate of reimbursement is achieved by that facility.

3) For a facility that would receive a higher nursing component rate per resident day under the payment methodology in effect on July 1, 2003 than the facility received June 30, 2003, the nursing component rate per resident day for the facility shall be adjusted based on the payment methodology in effect July 1, 2003.

4) Notwithstanding subsections (e)(2) and (3) of this Section, the nursing component rate per resident day for the facility shall be adjusted in accordance with subsection (c)(1)(E) of this Section.

(Source: Amended at 30 Ill. Reg. _____, effective ____________)

Section 147.175 Minimum Data Set (MDS) Data Integrity

a) The Department shall conduct reviews to determine the accuracy of resident assessment information transmitted in the Minimum Data Set (MDS) that are relevant to the determination of reimbursement rates. Such reviews may, at the discretion of the Department, be conducted electronically or in the facility.

b) The Department shall quarterly select, at random, a number of facilities in which to conduct on-site reviews. In addition, the Department may select facilities for
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on-site review based upon facility characteristics, past performance, or the Department's experience.

c) Electronic review. The Department shall conduct quarterly an electronic review of MDS data for eligible individuals to identify facilities for on-site review.

d) On-site review. The Department shall conduct an on-site review of MDS data for eligible individuals.

1) On-site reviews may be conducted with respect to residents or facilities that are identified pursuant to subsection (b) or (c) of this Section. Such review may include, but shall not be limited to, the following:

A) Review of resident records and supporting documentation, as identified in Section 147.200, to determine the accuracy of data relevant to the determination of reimbursement rates.

B) Review and collection of information necessary to assess the need for a specific service or care area and an extension beyond the established maximum length of time for a service or care area.

C) Review and collection of information from the facility that will establish the current direct care staffing level.

2) The number of residents in any selected facility for whom information is reviewed may, at the sole discretion of the Department, be limited or expanded.

3) Upon the conclusion of any review, the Department shall conduct a meeting with facility management to discuss preliminary conclusions of the review. If facility management disagrees with those preliminary conclusions, facility management may, at that time, provide additional documentation to support their position.

e) Corrective action. Upon the conclusion of the review and the consideration of any subsequent supporting documentation provided by the facility, the Department shall notify the facility of its final conclusions, both with respect to accuracy of data and recalculation of the facility's reimbursement rate.

1) Data Accuracy
A) Final conclusions with respect to inaccurate data shall be referred to the Department of Public Health.

B) The Department, in collaboration with the Department of Public Health, shall make available additional training in the completion of resident assessments and the coding and transmission of MDS records.

2) Recalculation of Reimbursement Rate. The Department shall determine if reported MDS data or facility staffing data that were subsequently determined to be unverifiable would cause the direct care component of the facility’s rate to be calculated differently when using the accurate data. No change in reimbursement required as a result of a review shall take effect before July 1, 2004. A facility's rate shall only be recalculated on those residents who have been subject to a Department review. A facility’s rate will be subject to change if the recalculation of the direct care component rate, as a result of using MDS data that are verifiable:

A) The recalculation of the direct care component rate, as a result of using MDS data that are verifiable:

Ai) Increases the rate by more than one percent. The rate is to be changed, retroactive to the beginning of the rate period, to the recalculated rate.

Bi) Decreases the rate by more than one percent. The rate is to be changed, retroactive to the beginning of the rate period, to the recalculated rate.

Ci) Decreases the rate by more than ten percent in addition to the rate change specified in subsection (d)(1)(C) of this Section. The direct care component of the rate shall be reduced, retroactive to the beginning of the rate period, by $1 for each whole percentage decrease in excess of ten percent.

B) The review determines that the mean direct care staff time per diem that the facility is currently maintaining is more than 25 percent below the mean direct care staff time per diem used to determine the facility's direct care component of the rate. The
recalculation shall use the mean direct care staff time per diem determined pursuant to Section 147.150(c)(1), multiplied by the factor described in Section 147.150(c)(1)(D), less mean direct care staff time per diem determined by the review that is in excess of 25 percent.

3) Any evidence or suspicion of deliberate falsification or misrepresentation of MDS data shall be referred to the Department's Inspector General and the Department of Public Health.

f) Appeals. Facilities disputing any rate change may request a hearing pursuant to 89 Ill. Adm. Code 140.830.

(Source: Amended at 30 Ill. Reg. ______, effective ____________)

Section 147.200 Minimum Data Set (MDS) On-Site Review Documentation Basic Rehabilitation Aide Training Program (Repealed)

a) Pursuant to Section 147.175, Department staff shall conduct on-site reviews of Minimum Data Set (MDS) data to determine the accuracy of resident information that is relevant to the determination of reimbursement rates.

b) There shall be documentation in the resident's record to support an MDS coded response indicating that the condition or activity was present or occurred during the observation or look back period. Directions provided by the RAI User's Manual (as described in Section 147.125) are the basis for all coding of the MDS. Section S is reserved for additional State-defined items. All documentation requirements pertain to the MDS 2.0 and Section S items.

c) Each nursing facility shall ensure that MDS data for each resident accurately and completely describes the resident's condition, as documented in the resident's clinical records, maintained by the nursing facility, and the clinical records shall be current, accurate and in sufficient detail to support the reported resident data.

d) Documentation guidance has been compiled from the RAI Manual, instructions that are present on the MDS 2.0 form itself, RAI-MH, and Illinois additional documentation requirements. If later guidance is released by CMS that contradicts or augments guidance provided in this Section, the more current information from CMS becomes the acceptable standard. If additional ICD9 codes are published, they will be reviewed for appropriateness.
e) Documentation from all disciplines and all portions of the resident's clinical record may be used to verify an MDS item response. All supporting documentation shall be found in the facility during an on-site visit.

f) All conditions or treatments shall have been present or occurred within the designated observation period. Documentation in the clinical record shall consistently support the item response and reflect care related to the symptom/problem. Documentation shall apply to the appropriate observation period and reflect the resident's status on all shifts. In addition, the problems that are identified by the MDS item responses that affect the resident's status shall be addressed on the care plan. Insufficient or inaccurate documentation may result in a determination that the MDS item response submitted could not be validated.

g) Disease Diagnoses

1) Code only those diseases or infections that have a relationship to the resident's current ADL (Activities of Daily Living) status, cognitive status, mood or behavior status, medical treatments, nursing monitoring or risk of death as directed in the RAI Manual.

2) The disease conditions require a physician-documented diagnosis in the clinical record. It is good clinical practice to have the resident's physician provide supporting documentation for any diagnosis.

3) Do not include conditions that have been resolved or no longer affect the resident's functioning or care plan. One of the important functions of the MDS assessment is to generate an updated, accurate picture of the resident's health status.

h) Activities of Daily Living (ADL)
Facilities shall maintain documentation that supports the coding of Section G, Physical Functioning, and Structural Problems on the MDS during the assessment reference period. The documentation shall show the MDS coded level of resident self-performance and support has been met.

i) Restorative specific documentation shall include:

1) Documentation shall define the resident's needs and identify a restorative nursing plan of care to assist the resident in reaching and/or maintaining
his or her highest level of functioning. Documentation shall contain objective and measurable information so that progress, maintenance or regression can be recognized.

2) Goals shall be resident specific, realistic, and measurable. The resident's endurance and ability to participate in the programs shall be addressed.

3) Written evidence of measurable objectives and interventions shall be in the resident's care plan, reviewed quarterly, and revised as necessary.

4) Written evidence of quarterly evaluation by a licensed nurse shall be in the clinical record.

5) There shall be written evidence that staff carrying out the programs have been trained in techniques that promote resident involvement in the activity.

6) There shall be written evidence that techniques are carried out or supervised by members of the nursing staff.

7) Sometimes under licensed nurse supervision, other staff and volunteers will be assigned to work with specific residents. If a volunteer is assigned to a specific resident, there shall be written evidence of specific training in techniques that promotes that resident's involvement in the restorative program.

8) Restorative programs shall be ongoing, unless there is written justification in the clinical record that supports the need to discontinue the program.

9) The number of minutes per day spent in a restorative program shall be documented for each resident and for each restorative program during the look back period.

10) The medical record shall also include documentation that restorative nursing services were administered as planned.

11) An assessment designed by the Department shall be required quarterly to assess the resident's endurance and ability to benefit from two or more restorative programs.
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12) A splint or brace is defined as an appliance for the fixation, union or protection of an injured part of the body.

13) A check and change program will not be scored as a toileting program.

14) All restorative programs provided per criteria of the RAI manual shall be coded on the MDS.

j) Discharge Planning
Social Services shall document monthly on the resident's potential for discharge, specific steps being taken toward discharge, and the progress being made. Social Service documentation shall demonstrate realistic evaluation, planning, and follow-through. Discharge plans shall address the current functional status of the resident, medical nursing needs, and the availability of family and/or community resources to meet the needs of the resident.

k) Psychosocial Adaptation Services
Behavioral symptoms shall be assessed and tracked during the look back period. They shall be addressed in the care plan with individualized goals and interventions.

l) Skills Training
Skills training is specific methods for assisting residents who need and can benefit from this training to address identified deficits and reach personal and clinical goals. To qualify for reimbursement, the provision of skills training shall meet all of the following criteria:

1) Skills and capabilities shall be assessed with the use of a standardized skills assessment, a cognitive assessment and an assessment of motivational potential. The assessment of motivational potential will assist in determining the type and size of the group in which a resident is capable of learning.

2) Addresses identified skill deficits related to goals noted in the treatment plan.

3) Skills training shall be provided by facility staff, trained in leading skills groups, who are paid by the facility.
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4) Training shall be provided in a private room with no other programs or activities going on at the same time. The environment shall be conducive to learning in terms of comfort, noise, and other distractions.

5) Training shall be provided in groups no larger than ten, with reduced group size for residents requiring special attention due to cognitive, motivational or clinical issues, as determined by the skills assessment, cognition and motivational potential. Individual sessions can be provided as appropriate and shall be identified in the care plan.

6) Training shall utilize a well-developed, structured curriculum and specific written content developed in advance to guide each of the sessions. (Published skills modules developed for the severe mentally ill (SMI) and Mental Illness/Substance Abuse (MISA) populations are available for use and as models).

7) The curriculum shall address discrete sets of skill competencies, breaking skills down into smaller components or steps in relation to residents' learning needs.

8) The specific written content shall provide the rationale for learning, connecting skill acquisition to resident goals.

9) Training shall employ skill demonstration/modeling, auditory and visual presentation methods, role-playing and skill practice, immediate positive and corrective feedback, frequent repetition of new material, practice assignments between training sessions (homework), and brief review of material from each previous session.

10) There shall be opportunities for cued skill practice and generalization outside session as identified in the care plan and at least weekly documentation relative to skill acquisition.

11) Each training session shall be provided and attended in increments of a minimum of 30 minutes each (not counting time to assemble and settle) at least three times per week. Occasional absences are allowable, with individual coverage of missed material as necessary.

m) Ancillary Provider Services
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1) Ancillary provider services are services that are provided by direct non-facility psychiatric service providers in order to meet 77 Ill. Adm. Code 300, Subpart S requirements.

2) Psychiatric rehabilitation services that are provided by non-facility providers or an outside entity shall meet the needs of the SMI resident as determined by the resident's individual treatment plan (ITP).

3) Facilities must ensure compliance with 77 Ill. Adm. Code 300.4050 when utilizing non-facility or outside ancillary providers.

n) Psychotropic Medication Monitoring
Facilities are to follow documentation guidelines as directed by 42 CFR 483.25(l) (State Operations Manual tags F329, F330, F331).

o) Dementia Care Unit

1) If the resident has a CPS score of five, care planning shall address the resident's participation in the unit's activities.

2) If a particular resident does not participate in at least an average of four 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.

3) Documentation shall support staff's efforts to involve the resident.

p) Exceptional Care Services

1) Extensive Respiratory Services

A) A respiratory therapist shall evaluate the status of the resident at least monthly if the resident has a tracheostomy.

B) Documentation of respiratory therapy being provided 15 minutes a day shall be present in the clinical record for the look back period.

C) Respiratory therapy requires documentation in the record of the treatment and the times given by a qualified professional
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(Respiratory therapist or trained nurse) as defined in the RAI manual.

2) Documentation shall be in place to support weaning from the ventilator.

3) Ventilator Care
   A) If the facility has residents receiving ventilator care, the facility shall have a respiratory therapist available at the facility or on call 24 hours a day.
   B) A respiratory therapist shall evaluate and document the status of the resident at least weekly.

4) Morbid Obesity
   A) A dietician's evaluation shall be completed with evidence of ongoing consultation.
   B) On-going monitoring of weight shall be evident.
   C) The psychosocial needs related to weight issues shall be identified and addressed.

5) Wound Care Services
   Facilities are to follow documentation guidelines as directed by 42 CFR 483.25(c) (State Operations Manual tag F314).

6) Traumatic Brain Injury (TBI)
   A) Documentation shall support that psychological therapy is being delivered by licensed mental health professionals, as described in the RAI manual.
   B) Documentation shall support a Special Symptom Evaluation program as an ongoing, comprehensive, interdisciplinary evaluation of behavioral symptoms as described in the RAI manual.
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C) Documentation shall support evaluation by a licensed mental health specialist in the last 90 days. This shall include an assessment of a mood, behavior disorder, or other mental health problems by a qualified clinical professional as described in the RAI manual.

D) The care plan shall address the behaviors of the resident and the interventions used.

q) Clarification and additional documentation requirements are as follows:

1) Defined actions such as further assessment or documentation, described in the RAI Manual as "good clinical practice" are required by the Department as supporting documentation. Clinical documentation that contributes to identification and communication of a resident's problems, needs and strengths, that monitors his or her condition on an on-going basis, and that records treatments and response to treatment is a matter of good clinical practice and is an expectation of trained and licensed health care professionals (RAI pages 1-23).

2) The facility shall have in place policies and procedures to address specific care needs of the residents, written evidence of ongoing in-services for staff related to residents' specific care needs and all necessary durable medical equipment to sustain life and carry out the plan of care as designed by the physician. In the absence of the above, a referral will be made to the Illinois Department of Public Health.

3) No specific types of documentation or specific forms are mandated, but documentation shall be sufficient to support the codes recorded on the MDS. Treatments and services ordered and coded shall be documented as delivered in the clinical record.

4) When completing a significant change assessment, the guidelines provided in the RAI Manual shall be followed. This includes documenting "the initial identification of a significant change in terms of the resident's clinical status in the progress notes" as described in RAI pages 2-7.

(Source: Old Section repealed at 27 Ill. Reg. 18680, effective November 26, 2003; new Section added at 30 Ill. Reg. _____, effective __________)
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Section 147. TABLE A  Staff Time (in Minutes) and Allocation by Need Level

a) Effective July 1, 2003, each Medicare and Medicaid certified nursing facility shall complete, and transmit quarterly to the Department, a full Minimum Data Set (MDS) for each resident who resides in a certified bed, regardless of payment source. A description of the MDS items referenced in the tables found following subsection (e) of this Table A are contained in the Long Term Care Resident Assessment Instrument User's Manual available from the Centers for Medicare and Medicaid Services, 7500 Security Boulevard, Baltimore, Maryland 21244 (December 2002).

b) Table A identifies 5137 MDS items that shall be used to calculate a profile on each Medicaid-eligible resident within each facility.

c) The profile for each Medicaid-eligible resident shall then be blended to determine the nursing component of the nursing facility's Medicaid rate.

d) Each MDS item in Table A includes a description of the item and the variable time referred to in Section 147.150(c)(1). The variable time assigned to each level represents the type of staff that should be delivering the service (unlicensed, licensed, social worker and activity) and the number of minutes allotted to that service item.

e) Following is a listing of the 5137 reimbursable MDS items found in Table A.

1) Base Social Work and Activity

2) Activities of Daily Living (ADL)

3) Restorative Programs

        PROM

        AROM

        Splint/Brace

        Bed Mobility

        Mobility/Transfer
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Walking
Dressing/Grooming
Eating
Prosthetic Care
Communication
Other Restorative

Scheduled Toileting, Continence

4) Medical Services

Continence Care
Catheter Care
Bladder Retaining
Pressure Ulcer Prevention
Moderate Skin Care Services
Intensive Skin Care Services
Ostomy Care
IV Therapy
Injections
Oxygen Therapy
Chemotherapy
Dialysis
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Blood Glucose Monitoring

End Stage Care

Infectious Disease

Acute Medical Conditions

Pain Management

Discharge Planning

Nutrition

Hydration

End Stage Care

Pain Management

Infectious Disease

Acute Medical Conditions

Nutrition

Skin Care Programs

Decubitus Prevention

Moderate Skin Intensity or Ostomy Care Services

Intensive Skin Care Services

IV Therapy

Injections

Oxygen Therapy
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Extensive Respiratory Services

Hydration

5) Mental Health (MH) Services

Psychosocial Adaptation

Psychotropic Medication Monitoring
Cognitive Impairment/Memory Assistance

Psychiatric Rehabilitation

Psychiatric Services (Section S)

Subpart S

Skills Training

Close or Constant Observation

6) Dementia Services

Cognitive Impairment/Memory Assistance

Dementia Care Unit

6) Special Patient Need Factors:

Communication: add 1% of staff time accrued for ADLs through MH

Vision Problems: add 2% of staff time accrued for ADLs through MH

Accident/Fall Prevention: add 3% of staff time accrued for ADLs through MH
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Restraint Free Care: add 2% of staff time accrued for ADLs through MH

Activities: add 2% of staff time accrued for ADLs through MH

7) Exceptional Care Services

Extensive Respiratory Services

Ventilator Care

Total Weaning From Ventilator

Morbid Obesity

Complex Wound Care

Traumatic Brain Injury (TBI)

8) Special Patient Need Factors:

Communication: add 1% of staff time accrued for ADLs through Exceptional Care Services

Vision Problems: add 2% of staff time accrued for ADLs through Exceptional Care Services

Accident/Fall Prevention: add 3% of staff time accrued for ADLs through Exceptional Care Services

Restraint Free Care: add 2% of staff time accrued for ADLs through Exceptional Care Services

Activities: add 2% of staff time accrued for ADLs through Exceptional Care Services

MDS ITEMS AND ASSOCIATED STAFF TIMES

Throughout Table A, where multiple levels are identified, only the highest level shall be scored.
DEPARTMENT OF HEALTHCARE AND FAMILY SERVICES

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1) **Base Social Work and Activity**

<table>
<thead>
<tr>
<th>Level</th>
<th>Unlicensed</th>
<th>Licensed</th>
<th>Social Worker</th>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>I</td>
<td>All Clients</td>
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2) **Activities of Daily Living**

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<th>Level</th>
<th>Composite Scores</th>
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<th>Licensed</th>
<th>Social Worker</th>
<th>Activity</th>
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<tr>
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<td>7.5 RN</td>
<td>7.5 LPN</td>
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<td>Composite 9-11</td>
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<td>9.5 RN</td>
<td>9.5 LPN</td>
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<td>Composite 12-14</td>
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<td>10.5 RN</td>
<td>10.5 LPN</td>
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<td>IV</td>
<td>Composite 15-29</td>
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<td>12.5 RN</td>
<td>12.5 LPN</td>
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</table>

**ADL Scoring Chart for the above Composite Levels**

MDS values equal to "-" denote missing data.

<table>
<thead>
<tr>
<th>ADL</th>
<th>MDS items</th>
<th>Description</th>
<th>Score</th>
</tr>
</thead>
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<td>Bed Mobility</td>
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<td>Self-Performance = missing</td>
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<tr>
<td></td>
<td>G1aA = 0 or</td>
<td>Self-Performance = independent</td>
<td></td>
</tr>
<tr>
<td></td>
<td>G1aA = 1.</td>
<td>Self-Performance = supervision</td>
<td></td>
</tr>
<tr>
<td></td>
<td>G1aA = 2.</td>
<td>Self-Performance = limited assistance</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>G1aA = 3</td>
<td>Self-Performance = extensive assistance</td>
<td></td>
</tr>
<tr>
<td></td>
<td>G1aA = 4</td>
<td>Self-Performance = total dependence</td>
<td></td>
</tr>
<tr>
<td></td>
<td>G1aA = 8 AND</td>
<td>Self-Performance = activity did not occur</td>
<td></td>
</tr>
<tr>
<td></td>
<td>G1aB = - or</td>
<td>Support = missing</td>
<td>4</td>
</tr>
<tr>
<td></td>
<td>G1aB = 0 or</td>
<td>Support = no set up or physical help</td>
<td></td>
</tr>
<tr>
<td></td>
<td>G1aB = 1 or</td>
<td>Support = set up help only</td>
<td></td>
</tr>
<tr>
<td></td>
<td>G1aB = 2.</td>
<td>Support = 1 person assist</td>
<td></td>
</tr>
<tr>
<td></td>
<td>G1aB = 3 or</td>
<td>Support = 2+ person physical assist</td>
<td>5</td>
</tr>
<tr>
<td></td>
<td>G1aB = 8.</td>
<td>Support = activity did not occur</td>
<td></td>
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### DEPARTMENT OF HEALTHCARE AND FAMILY SERVICES

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<table>
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<tr>
<th>Transfer</th>
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<tr>
<td>G1bA = 1.</td>
<td>Self-Performance = supervision</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>G1bA = 2.</td>
<td>Self-Performance = limited assistance</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>G1bA = 3 or</td>
<td>Self-Performance = extensive assistance</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>G1bA = 4 or</td>
<td>Self-Performance = total dependence</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>G1bA = 8 AND</td>
<td>Self-Performance = activity did not occur</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>G1bB = - or</td>
<td>Support = missing</td>
<td>4</td>
<td></td>
</tr>
<tr>
<td>G1bB = 0 or</td>
<td>Support = no set up or physical help</td>
<td>4</td>
<td></td>
</tr>
<tr>
<td>G1bB = 1 or</td>
<td>Support = set up help only</td>
<td>4</td>
<td></td>
</tr>
<tr>
<td>G1bB = 2.</td>
<td>Support = 1 person assist</td>
<td>4</td>
<td></td>
</tr>
<tr>
<td>G1bB = 3 or</td>
<td>Support = 2+ person physical assist</td>
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<tr>
<td>G1bB = 8.</td>
<td>Support = activity did not occur</td>
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<tr>
<td>G1eA = 1.</td>
<td>Self-Performance = supervision</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>G1eA = 2.</td>
<td>Self-Performance = limited assistance</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>G1eA = 3 or</td>
<td>Self-Performance = extensive assistance</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>G1eA = 4 or</td>
<td>Self-Performance = total dependence</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>G1eA = 8 AND</td>
<td>Self-Performance = activity did not occur</td>
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<td>Support = set up help only</td>
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<tr>
<td>G1eB = 2.</td>
<td>Support = 1 person assist</td>
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<td></td>
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<tr>
<td>G1eB = 3 or</td>
<td>Support = 2+ person physical assist</td>
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<tr>
<td>G1eB = 8.</td>
<td>Support = activity did not occur</td>
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<table>
<thead>
<tr>
<th>Toilet</th>
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<td>G1iA = 0 or</td>
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<tr>
<td>G1iA = 1.</td>
<td>Self-Performance = supervision</td>
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<tr>
<td>G1iA = 2.</td>
<td>Self-Performance = limited assistance</td>
<td>3</td>
<td></td>
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</tbody>
</table>
NOTICE OF PROPOSED AMENDMENTS

| G1iA = 3 or   | Self-Performance = extensive assistance |
| G1iA = 4 or   | Self-Performance = total dependence     |
| G1iA = 8 AND  | Self-Performance = activity did not occur|
| G1iB = - or   | Support = missing                        |
| G1iB = 0 or   | Support = no set up or physical help     |
| G1iB = 1 or   | Support = set up help only               |
| G1iB = 2.     | Support = 1 person assist                |
| G1iB = 3 or   | Support = 2+ person physical assist      |
| G1iB = 8.     | Support = activity did not occur         |

Dressing

| G1gA = - or   | Self-Performance = missing               |
| G1gA = 0 or   | Self-Performance = independent           |
| G1gA = 1.     | Self-Performance = supervision           |
| G1gA = 2.     | Self-Performance = limited assistance    |
| G1gA = 3 or   | Self-Performance = extensive assistance  |
| G1gA = 4 or   | Self-Performance = total dependence      |
| G1gA = 8.     | Self-Performance = activity did not occur|

Hygiene

| G1jA = - or   | Self-Performance = missing               |
| G1jA = 0 or   | Self-Performance = independent           |
| G1jA = 1.     | Self-Performance = supervision           |
| G1jA = 2.     | Self-Performance = limited assistance    |
| G1jA = 3 or   | Self-Performance = extensive assistance  |
| G1jA = 4 or   | Self-Performance = total dependence      |
| G1jA = 8.     | Self-Performance = activity did not occur|

Eating

| G1hA = - or   | Self-Performance = missing               |
| G1hA = 0 or   | Self-Performance = independent           |
| G1hA = 1.     | Self-Performance = supervision           |
| G1hA = 2.     | Self-Performance = limited assistance    |
With the exception of amputation/prosthesis care and splint or brace assistance restoratives, the total number of restorative programs eligible for reimbursement shall be limited to five, with no more than three being a Level II restorative. Scheduled toileting shall be included in this limit. Splint or brace assistance and amputation/prosthesis care shall be reimbursed independently. A resident coded in I1t (CVA/stroke) on the MDS and also coded as B4≤2 (cognitive skills for decision making) shall be limited to a total of six restoratives with no more than four being a Level II restorative. A Department
designed assessment shall be required quarterly to assess the resident's endurance and the resident's ability to benefit from two or more restorative programs.

When the number of restoratives coded on the MDS exceeds the allowable limits for reimbursement, the following order shall be used.

A) Eating Restorative
B) Scheduled Toileting
C) Walking Restorative
D) Transfer Restorative
E) PROM
F) Bed Mobility Restorative
G) Communication Restorative
H) Dressing/Grooming Restorative
I) Other Restorative
J) AROM

**Passive Range of Motion**

<table>
<thead>
<tr>
<th>Lev</th>
<th>MDS items</th>
<th>Description</th>
<th>Unl</th>
<th>Lic</th>
<th>SW</th>
<th>Act</th>
</tr>
</thead>
<tbody>
<tr>
<td>G4aA &gt; 0 or</td>
<td>Any function limits in ROM of neck</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>G4bA &gt; 0 or</td>
<td>Any function limits in ROM of arm</td>
<td></td>
<td></td>
<td></td>
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<td>G4cA &gt; 0 or</td>
<td>Any function limits in ROM of hand</td>
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<tr>
<td>G4dA &gt; 0 or</td>
<td>Any function limits in ROM of leg</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
**NOTICE OF PROPOSED AMENDMENTS**

| G4eA > 0 or | Any function limits in ROM of foot |
| G4fA > 0 or | Any function limits in ROM of other limitation or loss |
| G4aB > 0 or | Any function limits in voluntary movement of neck |
| G4bB > 0 or | Any function limits in voluntary movement of arm |
| G4cB > 0 or | Any function limits in voluntary movement of hand |
| G4dB > 0 or | Any function limits in voluntary movement of leg |
| G4eB > 0 or | Any function limits in voluntary movement of foot |
| G4fB > 0 or | Any function limits in voluntary movement of other limitation or loss |

**AND**

| I  | 3 ≤ P3a ≤ 5 | 3 to 5 days of PROM rehab | 10 |
| II | 6 ≤ P3a ≤ 7 | 6 to 7 days of PROM rehab | 15 |

### Active Range of Motion

<table>
<thead>
<tr>
<th>Lev</th>
<th>MDS items</th>
<th>Description</th>
<th>Unl</th>
<th>Lic</th>
<th>SW</th>
<th>Act</th>
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</thead>
<tbody>
<tr>
<td>G4aA,B &gt; 0 or</td>
<td>Any function limits in voluntary ROM or movement of neck</td>
<td></td>
<td></td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>
### NOTICE OF PROPOSED AMENDMENTS

| G4aB > 0 or | Any function limits in voluntary movement of arm |
| G4cB > 0 or | Any function limits in voluntary movement of hand |
| G4dB > 0 or | Any function limits in voluntary movement of leg |
| G4eB > 0 or | Any function limits in voluntary movement of foot |
| G4fB > 0 | Any function limits in voluntary movement of other limitation or loss |
| G4aB > 0 | Any function limits in voluntary movement of neck |

**AND:**

| I | 3 ≤ P3b ≤ 5 | 3 to 5 days of AROM rehab | 840 | 2 RN 2 LPN |
| II | 6 ≤ P3b ≤ 7 | 6 to 7 days of AROM rehab | 1245 | 2 RN 2 LPN |
DEPARTMENT OF HEALTHCARE AND FAMILY SERVICES

NOTICE OF PROPOSED AMENDMENTS

### Splint/Brace Assistance

<table>
<thead>
<tr>
<th>Lev</th>
<th>MDS items</th>
<th>Description</th>
<th>Unl</th>
<th>Lic</th>
<th>SW</th>
<th>Act</th>
</tr>
</thead>
<tbody>
<tr>
<td>I</td>
<td>3 ≤ P3c ≤ 5</td>
<td>3 to 5 days of assistance</td>
<td>840</td>
<td>2</td>
<td></td>
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</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>2</td>
<td>RN6</td>
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</tr>
<tr>
<td>II</td>
<td>6 ≤ P3c ≤ 7</td>
<td>6 to 7 days of assistance</td>
<td>1245</td>
<td>2</td>
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<tr>
<td></td>
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<td></td>
<td>2</td>
<td>LPN</td>
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</tbody>
</table>

### Bed Mobility Restorative

<table>
<thead>
<tr>
<th>Lev</th>
<th>MDS items</th>
<th>Description</th>
<th>Unl</th>
<th>Lic</th>
<th>SW</th>
<th>Act</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>0 &lt; G1aA &lt; 8 AND G7 = 1</td>
<td>Need assistance in bed mobility AND Some or all ADL tasks broken into subtasks</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>AND</td>
<td></td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I</td>
<td>3 ≤ P3d ≤ 5</td>
<td>3 to 5 days of rehab or restorative techniques</td>
<td>10</td>
<td>3</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>3</td>
<td>RN</td>
<td></td>
<td></td>
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<tr>
<td></td>
<td></td>
<td></td>
<td>3</td>
<td>LPN</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>II</td>
<td>6 ≤ P3d ≤ 7</td>
<td>6 to 7 days of rehab or restorative techniques</td>
<td>15</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>3</td>
<td>RN</td>
<td></td>
<td></td>
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<td></td>
<td></td>
<td></td>
<td>3</td>
<td>LPN</td>
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</table>

### Mobility (Transfer) Restorative

<table>
<thead>
<tr>
<th>Lev</th>
<th>MDS items</th>
<th>Description</th>
<th>Unl</th>
<th>Lic</th>
<th>SW</th>
<th>Act</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>0 &lt; G1bA &lt; 8 AND G7 = 1</td>
<td>Need assistance in transfer</td>
<td></td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>
DEPARTMENT OF HEALTHCARE AND FAMILY SERVICES

NOTICE OF PROPOSED AMENDMENTS

<table>
<thead>
<tr>
<th>G7 = 1</th>
<th>Some or all ADL tasks broken into subtasks</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>AND</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I</td>
<td>$3 \leq P3e \leq 5$</td>
<td>3 to 5 days of rehab or restorative techniques</td>
<td>10 $\frac{3}{3}$ RN $\frac{3}{6}$ LPN</td>
</tr>
<tr>
<td>II</td>
<td>$6 \leq P3e \leq 7$</td>
<td>6 to 7 days of rehab or restorative techniques</td>
<td>15 $\frac{3}{3}$ RN $\frac{3}{6}$ LPN</td>
</tr>
</tbody>
</table>

Walking Restorative

<table>
<thead>
<tr>
<th>Lev</th>
<th>MDS items</th>
<th>Description</th>
<th>Unl</th>
<th>Lic</th>
<th>S W</th>
<th>Act</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$0 &lt; G1cA &lt; 8$ or</td>
<td>Need assistance Any function limits in walking in room</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>$0 &lt; G1dA &lt; 8$ or</td>
<td>Need assistance Any function limits in walking in corridor</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>$0 &lt; G1eA &lt; 8$ or</td>
<td>Need assistance Any function limits in locomotion on unit</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>$0 &lt; G1fA &lt; 8$ or</td>
<td>Need assistance Any function limits in locomotion off unit</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td></td>
<td>AND</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>$G7 = 1$</td>
<td>Some or all ADL tasks broken into subtasks</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>AND</td>
<td></td>
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</tr>
<tr>
<td>I</td>
<td>$3 \leq P3f \leq 5$</td>
<td>3 to 5 days of rehab or restorative techniques</td>
<td>10 $\frac{3}{3}$ RN $\frac{3}{6}$ LPN</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### NOTICE OF PROPOSED AMENDMENTS

| II  | $6 \leq P3f \leq 7$ | 6 to 7 days of rehab or restorative techniques | 15 | $\frac{3}{3}$ RN | $\frac{3}{3}$ LPN | 6 |

#### Dressing or Grooming Restorative

<table>
<thead>
<tr>
<th>Lev</th>
<th>MDS items</th>
<th>Description</th>
<th>Unl</th>
<th>Lic</th>
<th>SW</th>
<th>Act</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$0 &lt; G1gA &lt; 8 \text{ or}$</td>
<td>Need assistance in dressing</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>$0 &lt; G1jA &lt; 8 \text{ AND}$</td>
<td>Need assistance in personal hygiene</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>$G7 = 1 \text{ AND}$</td>
<td>Some or all ADL tasks broken into subtasks</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>$B4 \leq 2$</td>
<td>Cognitive skills for decision making</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td></td>
<td>AND</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>$S1 = 0 \text{ AND}$</td>
<td>Does not meet IDPH Subpart S Criteria</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I</td>
<td>$3 \leq P3g \leq 5$</td>
<td>3 to 5 days of rehab or restorative techniques</td>
<td>10</td>
<td>$\frac{3}{3}$ RN</td>
<td>$\frac{3}{3}$ LPN</td>
<td>6</td>
</tr>
<tr>
<td>II</td>
<td>$6 \leq P3g \leq 7$</td>
<td>6 to 7 days of rehab or restorative techniques</td>
<td>15</td>
<td>$\frac{3}{3}$ RN</td>
<td>$\frac{3}{3}$ LPN</td>
<td>6</td>
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</table>

#### Eating Restorative

<table>
<thead>
<tr>
<th>Lev</th>
<th>MDS items</th>
<th>Description</th>
<th>Unl</th>
<th>Lic</th>
<th>SW</th>
<th>Act</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$0 &lt; G1hA &lt; 8 \text{ or}$</td>
<td>Need assistance in eating</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
DEPARTMENT OF HEALTHCARE AND FAMILY SERVICES

NOTICE OF PROPOSED AMENDMENTS

| K1b = 1 AND G7 = 1 | Has swallowing problem |  
|                     | AND                     |  
|                     | Some or all ADL tasks broken into subtasks |  
|                     | AND                     |  
| I 3 ≤ P3h ≤ 5      | 3 to 5 days of rehab or restorative techniques | 1540  
|                    |                         | 3 RN  
|                    |                         | 3 LPN  
| II 6 ≤ P3h ≤ 7     | 6 to 7 days of rehab or restorative techniques | 2045  
|                    |                         | 3 RN  
|                    |                         | 3 LPN  

**Amputation/Prosthetic Care**

<table>
<thead>
<tr>
<th>Lev</th>
<th>MDS items</th>
<th>Description</th>
<th>Unl</th>
<th>Lic</th>
<th>SW</th>
<th>Act</th>
</tr>
</thead>
<tbody>
<tr>
<td>I</td>
<td>3 ≤ P3i ≤ 5</td>
<td>3 to 5 days of assistance</td>
<td>10</td>
<td>3 RN</td>
<td>3 LPN</td>
<td>6</td>
</tr>
<tr>
<td>II</td>
<td>6 ≤ P3i ≤ 7</td>
<td>6 to 7 days of assistance</td>
<td>15</td>
<td>3 RN</td>
<td>3 LPN</td>
<td>6</td>
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</tbody>
</table>

**Communication Restorative**

<table>
<thead>
<tr>
<th>Lev</th>
<th>MDS items</th>
<th>Description</th>
<th>Unl</th>
<th>Lic</th>
<th>SW</th>
<th>Act</th>
</tr>
</thead>
<tbody>
<tr>
<td>C4 &gt; 0</td>
<td>Deficit in making self understood</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
DEPARTMENT OF HEALTHCARE AND FAMILY SERVICES

NOTICE OF PROPOSED AMENDMENTS

<table>
<thead>
<tr>
<th>Level</th>
<th>MDS items</th>
<th>Description</th>
<th>Unl</th>
<th>Lic</th>
<th>SW</th>
<th>Act</th>
</tr>
</thead>
<tbody>
<tr>
<td>I</td>
<td>$3 \leq P3j \leq 5$</td>
<td>3 to 5 days of rehab or restorative techniques</td>
<td>10</td>
<td>$\frac{3}{\text{RN}}$</td>
<td>$\frac{3}{\text{LPN}}$</td>
<td>6</td>
</tr>
<tr>
<td>II</td>
<td>$6 \leq P3j \leq 7$</td>
<td>6 to 7 days of rehab or restorative techniques</td>
<td>15</td>
<td>$\frac{3}{\text{RN}}$</td>
<td>$\frac{3}{\text{LPN}}$</td>
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Other Restorative

<table>
<thead>
<tr>
<th>Lev</th>
<th>MDS items</th>
<th>Description</th>
<th>Unl</th>
<th>Lic</th>
<th>SW</th>
<th>Act</th>
</tr>
</thead>
<tbody>
<tr>
<td>I</td>
<td>P3k=3 or greater AND Q2 &lt; 2 AND B2a = 0 AND B4 = 0 or 1 AND C6 = 0 or 1 AND S1 = 0</td>
<td>Other Restorative Improved or no change in care needs Short term memory okay Cognitive skills for decision making Ability to understand others Does not meet IDPH Subpart S criteria</td>
<td>6</td>
<td>$\frac{5}{\text{RN}}$</td>
<td>$\frac{5}{\text{LPN}}$</td>
<td></td>
</tr>
<tr>
<td>II</td>
<td>P3k = 3 or greater AND Q1c = 1 or 2 AND Q2 &lt; 2 AND</td>
<td>Other restorative Stay projected to be within 90 days Improved or no change in care needs</td>
<td>6</td>
<td>7.5</td>
<td>7.5</td>
<td></td>
</tr>
</tbody>
</table>
DEPARTMENT OF HEALTHCARE AND FAMILY SERVICES

NOTICE OF PROPOSED AMENDMENTS

| P1ar = 1 AND| Provide training to return to the community |
| B2a = 0 AND| Short-term memory |
| B4 = 0 or 1 AND| Cognitive skills for decision making |
| C6 = 0 or 1 AND| Ability to understand |
| S1 = 0| Does not meet IDPH Subpart S criteria |

Other Restorative shall only be reimbursed for a total of two quarters regardless of the level.

<table>
<thead>
<tr>
<th>Lev</th>
<th>MDS-items</th>
<th>Description</th>
<th>Unl</th>
<th>Lic</th>
<th>SW</th>
<th>Act</th>
</tr>
</thead>
<tbody>
<tr>
<td>Q1c = 1 or 2 And Q2 &lt; 2 And P1ar = 1</td>
<td>Stay projected to be within 90 days</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>And P1ar = 1</td>
<td>Improved or no change in care needs</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 ≤ P3k ≤ 5</td>
<td>Provide training to return to community</td>
<td>10</td>
<td>6</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 ≤ P3k ≤ 7</td>
<td>3 to 5 days of rehab or restorative techniques</td>
<td>15</td>
<td>6</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 to 7 days of rehab or restorative techniques</td>
<td></td>
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Scheduled Toileting Continence

<table>
<thead>
<tr>
<th>Lev</th>
<th>MDS-items</th>
<th>Description</th>
<th>Unl</th>
<th>Lic</th>
<th>SW</th>
<th>Act</th>
</tr>
</thead>
<tbody>
<tr>
<td>I</td>
<td>H3a = 1 AND</td>
<td>Any scheduled toileting plan</td>
<td>22</td>
<td>1.5 RN</td>
<td>1.5 LPN</td>
<td>3</td>
</tr>
</tbody>
</table>
### NOTICE OF PROPOSED AMENDMENTS

<table>
<thead>
<tr>
<th>H3b = 0 AND H3d = 0 AND (H1b &gt; 1 or G1iA &gt; 1)</th>
<th>No bladder retaining program</th>
<th>No indwelling catheter</th>
<th>Incontinent at least 2 or more times a week</th>
<th>Self-performance limited to total assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>H3b = 1 and H1b &gt; 1 OR (H3b ≤ 1 and H4 = 1)</td>
<td>Bladder retraining program</td>
<td>Bladder retraining program for one quarter</td>
<td>Residents continence has improved in last 90 days</td>
<td></td>
</tr>
</tbody>
</table>

### 4) Medical Services

#### Continence Care

<table>
<thead>
<tr>
<th>Lev</th>
<th>MDS items</th>
<th>Description</th>
<th>Unl</th>
<th>Lic</th>
<th>SW</th>
<th>Act</th>
</tr>
</thead>
<tbody>
<tr>
<td>I</td>
<td>Catheter Care</td>
<td></td>
<td>12</td>
<td>.5</td>
<td>.5</td>
<td>RN</td>
</tr>
<tr>
<td></td>
<td>H3d = 1 AND H3a = 0</td>
<td>Indwelling catheter present</td>
<td></td>
<td></td>
<td></td>
<td>LPN</td>
</tr>
<tr>
<td>II</td>
<td>Bladder Retraining</td>
<td>No scheduled toileting plan</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
DEPARTMENT OF HEALTHCARE AND FAMILY SERVICES

NOTICE OF PROPOSED AMENDMENTS

| H3b = 1 AND | Bladder retraining program | 32 | 5 RN 5 LPN |
| H3a = 0 AND | No scheduled toileting plan |   |          |
| H1b > 1 AND | Incontinent at least 2 or more times a week |   |          |
| B4 = 0 or 1 OR | Cognitive skills for decision making |   |          |
| H3b = 1 AND | Bladder retraining program |   |          |
| H3a = 0 AND | No scheduled toileting plan |   |          |
| H1b < 0 or 1 AND | Bladder continence |   |          |
| H4 = 1 AND | Change in continence |   |          |
| B4 = 0 or 1 AND | Cognitive skills in decision making |   |          |

Bladder scanners cannot be the sole content of the program. Continenence Care – Level II (Bladder Retraining) shall only be reimbursed for two quarters.

Pressure Ulcer Prevention

<table>
<thead>
<tr>
<th>Lev</th>
<th>MDS items</th>
<th>Description</th>
<th>Unl</th>
<th>Lic</th>
<th>SW</th>
<th>Act</th>
</tr>
</thead>
<tbody>
<tr>
<td>M3</td>
<td>1 or</td>
<td>History of resolved ulcers in last 90 days</td>
<td>15</td>
<td>4 RN</td>
<td>4 LPN</td>
<td></td>
</tr>
<tr>
<td>Any two of:</td>
<td>Pressure relieving devices for chair</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
**Moderate Skin Care/Intensive Skin Care**

<table>
<thead>
<tr>
<th>Lev</th>
<th>MDS items</th>
<th>Description</th>
<th>Unl</th>
<th>Lic</th>
<th>SW</th>
<th>Act</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>M1a &gt; 0 or Stage 1 ulcers</td>
<td>5</td>
<td>5</td>
<td>RN</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>M1b &gt; 0 or Stage 2 ulcers</td>
<td></td>
<td></td>
<td>LPN</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Any of: Other Skin Problems (below):</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>M4a = 1 Abrasions, bruises</td>
<td></td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td></td>
<td>M4b = 1 Burns</td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td></td>
<td>M4c = 1 Open lesions other than ulcers</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>M4d = 1 Rashes</td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td></td>
<td>M4e = 1 Skin desensitized to pain or pressure</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>M4f = 1 Skin tears or cuts (other than surgery)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>M4g = 1 Surgical wounds</td>
<td></td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>AND</td>
<td>4 of the following: Skin Treatments (below):</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>M5a = 1 Pressure relieving devices for chair</td>
<td></td>
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</tr>
</tbody>
</table>
## NOTICE OF PROPOSED AMENDMENTS

| M5b = 1     | Pressure relieving devices for bed       |
| M5c = 1     | Turning or repositioning program         |
| M5d = 1     | Nutrition or hydration intervention for skin |
| M5e = 1     | Ulcer care                               |
| M5f = 1     | Surgical wound care                      |
| M5g = 1     | Application of dressings (other than feet) |
| M5h = 1     | Application of ointments (other than feet) |
| M5i = 1     | Other prevention for skin (other than feet) |
| OR          |                                           |
| (M6b = 1 or | Infection of the foot                    |
| M6c = 1)    | Open lesion of the foot                  |
| AND         |                                           |
| M6f = 1     | And application of a dressing            |

### II

<table>
<thead>
<tr>
<th>Intensive Skin Care Services</th>
</tr>
</thead>
<tbody>
<tr>
<td>M1c &gt; 0 or Stage 3 ulcers</td>
</tr>
<tr>
<td>AND</td>
</tr>
<tr>
<td>M1d &gt; 0 Stage 4 ulcers</td>
</tr>
</tbody>
</table>

### Skin Treatments (below):

- M5a = 1 Pressure relieving devices for chair
- M5b = 1 Pressure relieving devices for bed
- M5c = 1 Turning or repositioning program
- M5d = 1 Nutrition or hydration intervention for skin

### AND

- M6b = 1 Infection of the foot
- M6c = 1 Open lesion of the foot
- M6f = 1 And application of a dressing
### Ulcer care

- M5e = 1
- Description: Ulcer care

### Surgical wound care

- M5f = 1
- Description: Surgical wound care

### Application of dressings (other than feet)

- M5g = 1
- Description: Application of dressings (other than feet)

### Application of ointments (other than feet)

- M5h = 1
- Description: Application of ointments (other than feet)

### Other prevention for skin (other than feet)

- M5i = 1
- Description: Other prevention for skin (other than feet)

#### Ostomy Services

<table>
<thead>
<tr>
<th>Lev</th>
<th>MDS items</th>
<th>Description</th>
<th>Unl</th>
<th>Lic</th>
<th>SW</th>
<th>Act</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>P1af = 1</td>
<td>Ostomy care performed</td>
<td>5</td>
<td>2.5 RN</td>
<td>2.5 LPN</td>
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#### IV Therapy

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<th>Lic</th>
<th>SW</th>
<th>Act</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Plac = 1</td>
<td>IV medication</td>
<td>1</td>
<td>15 RN</td>
<td>15 LPN</td>
<td></td>
</tr>
<tr>
<td>or</td>
<td>K5a = 1</td>
<td>Parenteral/IV nutrition</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>AND</td>
<td>P1ae = 1</td>
<td>Monitoring acute medical condition</td>
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</tbody>
</table>

#### Injections

<table>
<thead>
<tr>
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<th>MDS items</th>
<th>Description</th>
<th>Unl</th>
<th>Lic</th>
<th>SW</th>
<th>Act</th>
</tr>
</thead>
</table>
Oxygen Therapy

<table>
<thead>
<tr>
<th>Lev</th>
<th>MDS items</th>
<th>Description</th>
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<th>Lic</th>
<th>SW</th>
<th>Act</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>P1ag = 1</td>
<td>Oxygen therapy administered in last 14 days</td>
<td>9</td>
<td>7.5 RN</td>
<td>7.5 LPN</td>
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</tr>
</tbody>
</table>

Chemotherapy

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<tr>
<th>Lev</th>
<th>MDS items</th>
<th>Description</th>
<th>Unl</th>
<th>Lic</th>
<th>SW</th>
<th>Act</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>P1aa = 1</td>
<td>Chemotherapy given</td>
<td>1</td>
<td>5 RN</td>
<td>5 LPN</td>
<td></td>
</tr>
</tbody>
</table>

Dialysis

<table>
<thead>
<tr>
<th>Lev</th>
<th>MDS items</th>
<th>Description</th>
<th>Unl</th>
<th>Lic</th>
<th>SW</th>
<th>Act</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>P1ab = 1</td>
<td>Dialysis given</td>
<td>1</td>
<td>5 RN</td>
<td>5 LPN</td>
<td>2</td>
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</table>

Blood Glucose Monitoring

<table>
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<tr>
<th>Lev</th>
<th>MDS items</th>
<th>Description</th>
<th>Unl</th>
<th>Lic</th>
<th>SW</th>
<th>Act</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>I1a = 1 AND</td>
<td>Diabetes mellitus</td>
<td>1</td>
<td>1 RN</td>
<td>1 LPN</td>
<td></td>
</tr>
</tbody>
</table>
# DEPARTMENT OF HEALTHCARE AND FAMILY SERVICES

## NOTICE OF PROPOSED AMENDMENTS

| K5e = 1 or | Therapeutic diet |
| K5f = 1 or | Dietary supplement |
| O3 = 7 | Injections daily |

## End Stage Care

<table>
<thead>
<tr>
<th>Lev</th>
<th>MDS items</th>
<th>Description</th>
<th>Unl</th>
<th>Lic</th>
<th>SW</th>
<th>Act</th>
</tr>
</thead>
<tbody>
<tr>
<td>I</td>
<td>J5c = 1</td>
<td>End stage disease, 6 or fewer months to live</td>
<td>10</td>
<td>6 RN/6 LPN</td>
<td>8</td>
<td></td>
</tr>
</tbody>
</table>

Restoratives included scheduled toileting and bladder retraining sets to level '0' except AROM, PROM, splint/brace: limit of 4 quarters

## Infectious Disease

<table>
<thead>
<tr>
<th>Lev</th>
<th>MDS items</th>
<th>Description</th>
<th>Unl</th>
<th>Lic</th>
<th>SW</th>
<th>Act</th>
</tr>
</thead>
<tbody>
<tr>
<td>I</td>
<td>I2a = 1 or</td>
<td>Antibiotic resistant infection</td>
<td>18</td>
<td>8.5 RN/8.5 LPN</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>I2b = 1 or</td>
<td>Clostridium Difficile</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I2i = 1 or</td>
<td>TB</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I2k = 1 or</td>
<td>Viral hepatitis</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I2e = 1 or</td>
<td>Pneumonia</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I2g = 1 or</td>
<td>Septicemia</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I2l = 1 or</td>
<td>Wound infection</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I2 j = 1 or</td>
<td>Urinary tract infection present</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I3 = ICD9 code 041.01,133.0</td>
<td>Streptococcus Group A, scabies</td>
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</tr>
</tbody>
</table>
## Acute Medical Conditions

<table>
<thead>
<tr>
<th>Lev</th>
<th>MDS items</th>
<th>Description</th>
<th>Unl</th>
<th>Lic</th>
<th>SW</th>
<th>Act</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>J5b = 1</td>
<td>Acute episode or flare-up of chronic condition</td>
<td>1</td>
<td>11.5 RN</td>
<td>11.5 LPN</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>AND</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>P1ae = 1</td>
<td>Monitoring acute medical condition</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td></td>
<td>AND</td>
<td></td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td></td>
<td>P1ao = 0</td>
<td>Not hospice care</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td></td>
<td>OR</td>
<td></td>
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<td></td>
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</tr>
<tr>
<td></td>
<td>J5a = 1</td>
<td>Condition makes resident's cognitive, ADL, mood or behavior patterns unstable</td>
<td></td>
<td></td>
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<td></td>
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<tr>
<td></td>
<td>AND</td>
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<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>P1ao = 0</td>
<td>Not hospice care</td>
<td></td>
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<td></td>
<td>AND</td>
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<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>P1ae = 1</td>
<td>Monitoring acute medical condition</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td></td>
<td>OR</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>B5a = 2</td>
<td>Easily distracted over last 7 days</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>B5b = 2</td>
<td>Periods of altered perceptions or awareness of surroundings over last 7 days</td>
<td></td>
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<tr>
<td></td>
<td>B5e = 2</td>
<td>Periods of lethargy over last 7 days</td>
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<tr>
<td></td>
<td>B5f = 2</td>
<td>Mental function varies over course of day in last 7 days</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>AND</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>P1ae = 1</td>
<td>Monitoring acute medical condition</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>AND</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>P1ao = 0</td>
<td>Not hospice care</td>
<td></td>
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</tbody>
</table>

## Pain Management
## Notice of Proposed Amendments

### I. Discharge Planning

<table>
<thead>
<tr>
<th>Lev</th>
<th>MDS items</th>
<th>Description</th>
<th>Unl</th>
<th>Lic</th>
<th>SW</th>
<th>Act</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>J2a = 0 AND J2b &gt; 0</td>
<td>Demonstrates or complains of pain</td>
<td>4 RN</td>
<td>8 LPN</td>
<td>16</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Mild to excruciating intensity</td>
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</tbody>
</table>

**Discharge Planning**

<table>
<thead>
<tr>
<th>Lev</th>
<th>MDS items</th>
<th>Description</th>
<th>Unl</th>
<th>Lic</th>
<th>SW</th>
<th>Act</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Q1c = 1 or 2 AND Q2 &lt; 2 AND P1ar = 1</td>
<td>Stay projected to be within 90 days</td>
<td>8 RN</td>
<td>8 LPN</td>
<td>16</td>
<td></td>
</tr>
</tbody>
</table>

**End Stage Care**

<table>
<thead>
<tr>
<th>Lev</th>
<th>MDS items</th>
<th>Description</th>
<th>Unl</th>
<th>Lic</th>
<th>SW</th>
<th>Act</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>J5c = 1</td>
<td>End-stage disease, 6 or fewer months to live</td>
<td>10</td>
<td>12</td>
<td>8</td>
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</tbody>
</table>

Restorative set to level '0' except AROM, PROM, Splint/brace: limit of 4 quarters

**Pain Management**

<table>
<thead>
<tr>
<th>Lev</th>
<th>MDS items</th>
<th>Description</th>
<th>Unl</th>
<th>Lic</th>
<th>SW</th>
<th>Act</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>J2a &gt; 0</td>
<td>Demonstrates or complains of pain</td>
<td>4</td>
<td>8</td>
<td>1</td>
<td>1</td>
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**Infectious Disease**

<table>
<thead>
<tr>
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<th>MDS-items</th>
<th>Description</th>
<th>Unl</th>
<th>Lie</th>
<th>SW</th>
<th>Act</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>I2a = 1 or</td>
<td>Antibiotic resistant infection</td>
<td>17</td>
<td>18</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td></td>
<td>I2b = 1 or</td>
<td>Clostridium Difficile</td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td></td>
<td>I2i = 1 or</td>
<td>TB</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td></td>
<td>I2k = 1 or</td>
<td>Viral Hepatitis</td>
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</tr>
<tr>
<td></td>
<td>I2e = 1 or</td>
<td>Pneumonia</td>
<td></td>
<td></td>
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</tr>
<tr>
<td></td>
<td>I2g = 1 or</td>
<td>Septicemia</td>
<td></td>
<td></td>
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</tr>
<tr>
<td></td>
<td>I2l = 1 or</td>
<td>Wound Infection</td>
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<tr>
<td></td>
<td>I3 = ICD9 code</td>
<td>Streptococcus Group A, Scabies</td>
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</table>

**Acute Medical Conditions**

<table>
<thead>
<tr>
<th>Lev</th>
<th>MDS-items</th>
<th>Description</th>
<th>Unl</th>
<th>Lie</th>
<th>SW</th>
<th>Act</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>I5b = 1 and</td>
<td>Acute episode or flare-up of chronic condition</td>
<td>23</td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>P1ae = 1 and</td>
<td>Monitoring acute medical condition</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>P1ao = 0 or</td>
<td>Not Hospice care</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>(J5a = 1 and</td>
<td>Condition makes resident's cognitive, ADL, mood or behavior patterns unstable</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>P1ao = 0 and</td>
<td>Not Hospice care</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>P1ae = 1 and</td>
<td>Monitoring acute medical condition</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>(B5a = 2 or</td>
<td>Easily distracted over last 7 days</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
DEPARTMENT OF HEALTHCARE AND FAMILY SERVICES

NOTICE OF PROPOSED AMENDMENTS

| B5b = 2 or | Periods of altered perceptions or awareness of surroundings over last 7 days |
| B5e = 2 or | Episodes of disorganized speech over last 7 days |
| B5d = 2 or | Periods of restlessness over last 7 days |
| B5f = 2 | Mental function varies over course of day in last 7 days |

**Nutrition**

<table>
<thead>
<tr>
<th>Lev</th>
<th>MDS items</th>
<th>Description</th>
<th>Unl</th>
<th>Lic</th>
<th>SW</th>
<th>Act</th>
</tr>
</thead>
<tbody>
<tr>
<td>I</td>
<td>K5h = 1 OR</td>
<td>On a planned weight change program</td>
<td>4</td>
<td>1.5 RN 1.5 LPN</td>
<td>11 RN 11 LPN</td>
<td>1</td>
</tr>
<tr>
<td>K5f = 1</td>
<td>Dietary supplement given between meals</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>II</td>
<td>K5b = 1 and Intake = 1</td>
<td>Tube feeding in last 7 days See below</td>
<td>0</td>
<td>22</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>Intake = 1 if K6a = 3 or</td>
<td>Parenteral/enteral intake 51-75% of total calories</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>K6a = 4</td>
<td>Parenteral/enteral intake 76-100% of total calories</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Or Intake = 1 if K6a = 2 and</td>
<td>Parenteral/enteral intake 26-25% of total calories</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
**NOTICE OF PROPOSED AMENDMENTS**

| K6b = 2 or | Average fluid intake by IV or tube is 501-1000 cc/day |
| K6b = 3 or | Average fluid intake by IV or tube is 1001-1500 cc/day |
| K6b = 4 or | Average fluid intake by IV or tube is 1501-2000 cc/day |
| K6b = 5 | Average fluid intake by IV or tube is 2001 or more cc/day |

**Skin Care Programs** — only the highest qualifying level of the moderate skin intensity or intensive skin care applies

**Decubitus Prevention**

<table>
<thead>
<tr>
<th>Lev</th>
<th>MDS Items</th>
<th>Description</th>
<th>Unl</th>
<th>Lic</th>
<th>SW</th>
<th>Act</th>
</tr>
</thead>
<tbody>
<tr>
<td>M3 = 1 or</td>
<td>History of resolved ulcers in last 90 days</td>
<td>15</td>
<td>8</td>
<td></td>
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<td></td>
</tr>
<tr>
<td>Any two of:</td>
<td>Pressure-relieving device(s) for chair</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>M5a</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>M5b</td>
<td>Pressure-relieving device(s) for bed</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>M5c</td>
<td>Turning or repositioning program</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>M5d</td>
<td>Nutrition or hydration intervention for skin</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>M5i</td>
<td>Other prevention for skin (other than feet)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Moderate Skin Intensity Services or Ostomy Care Services**

<table>
<thead>
<tr>
<th>Lev</th>
<th>MDS Items</th>
<th>Description</th>
<th>Unl</th>
<th>Lic</th>
<th>SW</th>
<th>Act</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>M1a = 0 or</td>
<td>Stage 1 ulcers</td>
<td>5</td>
<td>10</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>M1b = 0 or</td>
<td>Stage 2 ulcers</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
DEPARTMENT OF HEALTHCARE AND FAMILY SERVICES

NOTICE OF PROPOSED AMENDMENTS

Any of:

Other Skin Problems (below):

M4a  Abrasions, bruises
M4b  Burns
M4c  Open lesions other than ulcers
M4d  Rashes
M4e  Skin desensitized to pain or pressure
M4f  Skin tears or cuts (other than surgery)
M4g  Surgical wounds

And any of:

Skin Treatments (below):

M5a  Pressure relieving device(s) for chair
M5b  Pressure relieving device(s) for bed
M5c  Turning or repositioning program
M5d  Nutrition or hydration intervention for skin
M5e  Ulcer care
M5f  Surgical wound care
M5g  Application of dressings (other than feet)
M5h  Application of ointments (other than feet)
M5i  Other prevention for skin (other than feet)

OR

(M6b = 1 or Infection of the foot
M6c = 1) and
M6f = 1 or And application of a dressing
P1af = 1 Provide ostomy care in last 14 days
DEPARTMENT OF HEALTHCARE AND FAMILY SERVICES

NOTICE OF PROPOSED AMENDMENTS

Set Intensive Skin Care Services to zero

<table>
<thead>
<tr>
<th>Lev</th>
<th>MDS-items</th>
<th>Description</th>
<th>Unl</th>
<th>Lie</th>
<th>SW</th>
<th>Act</th>
</tr>
</thead>
<tbody>
<tr>
<td>H</td>
<td>M1c&gt;0</td>
<td>Stage 3 ulcers</td>
<td>5</td>
<td>30</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>M1d&gt;0</td>
<td>Stage 4 ulcers</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>And any of: Skin Treatments (below):</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>M5a</td>
<td>Pressure relieving device(s) for chair</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>M5b</td>
<td>Pressure relieving device(s) for bed</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>M5c</td>
<td>Turning or repositioning program</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>M5d</td>
<td>Nutrition or hydration intervention for skin</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>M5e</td>
<td>Ulcer care</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>M5f</td>
<td>Surgical wound care</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>M5g</td>
<td>Application of dressings (other than feet)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>M5h</td>
<td>Application of ointments (other than feet)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>M5i</td>
<td>Other prevention for skin (other than feet)</td>
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</table>

Set Moderate Skin Intensity Services to zero

<table>
<thead>
<tr>
<th>Lev</th>
<th>MDS-items</th>
<th>Description</th>
<th>Unl</th>
<th>Lie</th>
<th>SW</th>
<th>Act</th>
</tr>
</thead>
<tbody>
<tr>
<td>I</td>
<td>P1ac=1 or</td>
<td>IV medication in last 14 days</td>
<td>9</td>
<td>30</td>
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</table>
### Injections

<table>
<thead>
<tr>
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<th>Lic</th>
<th>SW</th>
<th>Act</th>
</tr>
</thead>
<tbody>
<tr>
<td>I</td>
<td>O3 &gt; 0</td>
<td>Number of injections in last 7 days</td>
<td>6</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Oxygen Therapy

<table>
<thead>
<tr>
<th>Lev</th>
<th>MDS Items</th>
<th>Description</th>
<th>Unl</th>
<th>Lic</th>
<th>SW</th>
<th>Act</th>
</tr>
</thead>
<tbody>
<tr>
<td>I</td>
<td>P1ag = 1</td>
<td>Oxygen therapy administered in last 14 days</td>
<td>9</td>
<td>45</td>
<td></td>
<td></td>
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</tbody>
</table>

### Extensive Respiratory Services

<table>
<thead>
<tr>
<th>Lev</th>
<th>MDS Items</th>
<th>Description</th>
<th>Unl</th>
<th>Lic</th>
<th>SW</th>
<th>Act</th>
</tr>
</thead>
<tbody>
<tr>
<td>I</td>
<td>P1ai = 1 or</td>
<td>Performed suctioning in last 14 days</td>
<td>45</td>
<td>30</td>
<td></td>
<td></td>
</tr>
<tr>
<td>I</td>
<td>P1aj = 1</td>
<td>Administered tracheostomy care in last 14 days</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Hydration

<table>
<thead>
<tr>
<th>Lev</th>
<th>MDS Items</th>
<th>Description</th>
<th>Unl</th>
<th>Lic</th>
<th>SW</th>
<th>Act</th>
</tr>
</thead>
<tbody>
<tr>
<td>I</td>
<td>H2b = 1 or</td>
<td>Constipation</td>
<td>15</td>
<td></td>
<td></td>
<td>1</td>
</tr>
<tr>
<td>I</td>
<td>ICD9 = 564.00 or 564.7 AND</td>
<td>Constipation</td>
<td></td>
<td></td>
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<td></td>
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</tbody>
</table>
5) Mental Health Services—only the highest qualifying score of the three services applies

Psychosocial Adaptation Services

<table>
<thead>
<tr>
<th>Lev</th>
<th>MDS items</th>
<th>Description</th>
<th>Unl</th>
<th>Lic</th>
<th>SW</th>
<th>Act</th>
</tr>
</thead>
<tbody>
<tr>
<td>I</td>
<td>(P2a = 1 or</td>
<td>Behavior symptom evaluation</td>
<td>12</td>
<td>3 RN</td>
<td>8</td>
<td>2</td>
</tr>
</tbody>
</table>
DEPARTMENT OF HEALTHCARE AND FAMILY SERVICES

NOTICE OF PROPOSED AMENDMENTS

\[ P_{2b} = 1 \text{ or } \begin{aligned} &\text{Evaluation by licensed MH} \\ &\text{specialist within last 90 days} \end{aligned} \]

\[ P_{2c} = 1 \text{ or } \text{Group therapy} \]

\[ P_{2d} = 1 \text{ AND Resident specific changes to} \]

\[ \text{environment} \]

\[ \text{Any } E_{1a-p} > 0 \text{ or No indicators of psychosocial} \]

\[ \text{well-being} \]

\[ \text{Any } F_{1g} = 1 \text{ or Any unsettled relationships} \]

\[ \text{Any } F_{2a-g} = 1 \text{ or Issues with past roles} \]

\[ E_{4aA} > 0 \text{ or Wandering in last 7 days} \]

\[ E_{4bA} > 0 \text{ or Verbally abusive in last 7 days} \]

\[ E_{4cA} > 0 \text{ or Physically abusive in last 7 days} \]

\[ E_{4dA} > 0 \text{ or Inappropriate or disruptive} \]

\[ \text{behavior in last 7 days} \]

\[ E_{4eA} > 0 \text{ or Resisted care in last 7 days} \]

\[ J_{1e} = 1 \text{ or Delusions} \]

\[ J_{1i} = 1 \text{ or Hallucinations} \]

**Psychotropic Medication Monitoring**

<table>
<thead>
<tr>
<th>Lev</th>
<th>MDS items</th>
<th>Description</th>
<th>Unl</th>
<th>Lic</th>
<th>SW</th>
<th>Act</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>O4a = 7</td>
<td>Antipsychotic meds</td>
<td>5</td>
<td>2.5</td>
<td>RN</td>
<td>LPN</td>
</tr>
<tr>
<td></td>
<td>O4b = 7</td>
<td>Antianxiety meds</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>O4c = 7</td>
<td>Antidepressant meds</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Psychiatric Services

#### Section S

<table>
<thead>
<tr>
<th>Lev</th>
<th>MDS items</th>
<th>Description</th>
<th>Unl</th>
<th>Lic</th>
<th>SW</th>
<th>Act</th>
</tr>
</thead>
<tbody>
<tr>
<td>I</td>
<td>S1 = 1 \ AND</td>
<td>Meets IDPH Subpart S criteria</td>
<td>13</td>
<td>2.5</td>
<td>20</td>
<td></td>
</tr>
<tr>
<td></td>
<td>S8 = 1 \ AND</td>
<td>Ancillary provider services delivered by non-facility staff</td>
<td></td>
<td>2.5</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Dressing/ grooming and other restorative, cognitive performance, and dementia care unit reset to 0</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>II</td>
<td>S1 = 1 \ AND</td>
<td>Meets IDPH Subpart S criteria</td>
<td>13</td>
<td>4.5</td>
<td>20</td>
<td></td>
</tr>
<tr>
<td></td>
<td>ADL Index = 3 \ or 4 \ AND</td>
<td>ADL composite score of 12-29</td>
<td></td>
<td>4.5</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>(AA3-A3a)/365.25 ≥ 65 \ AND</td>
<td>Resident is 65 years of age or older at time of the assessment reference date</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### NOTICE OF PROPOSED AMENDMENTS

<table>
<thead>
<tr>
<th>Lev</th>
<th>MDS items</th>
<th>Description</th>
<th>Unl</th>
<th>Lic</th>
<th>SW</th>
<th>Act</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>S7 = 1</td>
<td>Skills training provided</td>
<td>6</td>
<td>6 RN</td>
<td>6</td>
<td>6</td>
</tr>
<tr>
<td></td>
<td>S1 = 1</td>
<td>Meets IDPH Subpart S criteria</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Close or Constant Observation – Section S

<table>
<thead>
<tr>
<th>Lev</th>
<th>MDS items</th>
<th>Description</th>
<th>Unl</th>
<th>Lic</th>
<th>SW</th>
<th>Act</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>S5 = 1</td>
<td>Close or constant observation</td>
<td>6</td>
<td>2 RN</td>
<td>2</td>
<td>5</td>
</tr>
<tr>
<td></td>
<td>AND</td>
<td></td>
<td></td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>
NOTICE OF PROPOSED AMENDMENTS

6) **Dementia Services**

**Cognitive Impairment/Memory Assistance Services**

<table>
<thead>
<tr>
<th>Lev</th>
<th>MDS items</th>
<th>Description</th>
<th>Unl</th>
<th>Lic</th>
<th>SW</th>
<th>Act</th>
</tr>
</thead>
</table>
| I   | CPS = 2  
     AND  
     S1 = 0 | Cognitive performance scale of 2  
          Does not meet IDPH Subpart S criteria | 6   |     |    | 4   |
| II  | CPS = 3 or 4  
     AND  
     S1 = 0 | Cognitive performance scale of ≥ 3  
          Does not meet IDPH Subpart S criteria | 16  | 3 RN  
     3 LPN  
     6 | 11 | 10 |
| III | CPS = 5 or 6  
     AND  
     S1 = 0 | Cognitive performance scale of ≥ 5  
          Does not meet IDPH Subpart S criteria | 21  | 5.5 RN  
     5.5 LPN  
     4+ | 16 | 15 |

**Cognitive Performance Scale Codes**

<table>
<thead>
<tr>
<th>Scale</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>Intact</td>
</tr>
<tr>
<td>1</td>
<td>Borderline Intact</td>
</tr>
<tr>
<td>2</td>
<td>Mild Impairment</td>
</tr>
<tr>
<td>3</td>
<td>Moderate Impairment</td>
</tr>
<tr>
<td>4</td>
<td>Moderate Severe Impairment</td>
</tr>
<tr>
<td>5</td>
<td>Severe Impairment</td>
</tr>
</tbody>
</table>
### Impairment Count for the Cognitive Performance Scale

<table>
<thead>
<tr>
<th>I code</th>
<th>MDS items</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>IC 1</td>
<td>B2a = 1</td>
<td>Memory problem</td>
</tr>
<tr>
<td>IC 2</td>
<td>B4 = 1 or 2</td>
<td>Some dependence in cognitive skills</td>
</tr>
<tr>
<td>IC 3</td>
<td>1 ≤ C4 ≤ 3</td>
<td>Usually understood Difficulty finding words to rarely or never understood</td>
</tr>
</tbody>
</table>

**Note:** None of B2a, B4, or C4 can be missing

### Severe Impairment Count for the Cognitive Performance Scale

<table>
<thead>
<tr>
<th>I code</th>
<th>MDS items</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>SIC 0</td>
<td>Below not met</td>
<td></td>
</tr>
<tr>
<td>SIC 1</td>
<td>B4 = 2</td>
<td>Moderately impaired in cognitive skills</td>
</tr>
<tr>
<td>SIC 2</td>
<td>C4 = 2 or 3</td>
<td>Sometimes understood to rarely or never understood</td>
</tr>
</tbody>
</table>

**Note:** None of B2a, B4, or C4 can be missing

### Cognitive Performance Scale

<table>
<thead>
<tr>
<th>Scale</th>
<th>MDS items</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Coma</td>
<td>N1a = 0 and</td>
<td>Awake all or most of the time in the morning</td>
</tr>
<tr>
<td></td>
<td>N1b = 0 and</td>
<td>Awake all or most of the time in the afternoon</td>
</tr>
<tr>
<td></td>
<td>N1c = 0 and</td>
<td>Awake all or most of the time in the evening</td>
</tr>
<tr>
<td></td>
<td>B1 = 1 and</td>
<td>Is comatose</td>
</tr>
<tr>
<td></td>
<td>G1aA = 4 or 8 And</td>
<td>Bed-Mobility Self-Performance = total dependence or did not occur</td>
</tr>
<tr>
<td></td>
<td>G1bA = 4 or 8 And</td>
<td>Transfer Self-Performance = total dependence or did not occur</td>
</tr>
<tr>
<td></td>
<td>G1hA = 4 or 8 And</td>
<td>Eating Self-Performance = total dependence or did not occur</td>
</tr>
<tr>
<td></td>
<td>G1iA = 4 or 8 And</td>
<td>Toilet Use Self-Performance = total dependence or did not occur</td>
</tr>
<tr>
<td></td>
<td>6 Not (B4 = 0,1, 2)</td>
<td>Not have cognitive skills independent to moderately impaired</td>
</tr>
</tbody>
</table>
### NOTICE OF PROPOSED AMENDMENTS

| 6 | B4 = 3 And G1hA = 4 or 8 | Cognitive skills severely impaired Eating Self-Performance = total dependence or did not occur |
| 5 | B4 = 3 And G1hA = - or ≤ 3 | Cognitive skills severely impaired Eating Self-Performance = missing to extensive assistance |
| 4 | If IC code = 2 or 3 And SIC code = 2 | Some dependence in cognitive skills Usually understood Difficulty finding words to rarely or never understood Sometimes understood to rarely or never understood |
| 3 | If IC code = 2 or 3 And SIC code = 1 | Some dependence in cognitive skills Usually understood Difficulty finding words to rarely or never understood Moderately impaired in cognitive skills |
| 2 | And SIC code = 0 | Better than moderate cognition skills and usually can be understood |
| 1 | If IC code = 0 | Better than moderate cognition skills and usually can be understood |
| 1 | If IC code = 1 | Memory problem |

**Dementia Care Unit**

<table>
<thead>
<tr>
<th>Lev</th>
<th>MDS items</th>
<th>Description</th>
<th>Unl</th>
<th>Lic</th>
<th>SW</th>
<th>Act</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>P1an = 1 AND 11q = 1 or 11u = 1 AND S1 = 0 AND CPS 2,3,4,5 AND</td>
<td>Alzheimer's/Dementia special care unit Alzheimer's Disease Dementia other than Alzheimer's Does not meet IDPH Subpart S criteria CPS score</td>
<td>15</td>
<td>4 RN 4 LPN</td>
<td>10</td>
<td>10</td>
</tr>
</tbody>
</table>
DEPARTMENT OF HEALTHCARE AND FAMILY SERVICES

NOTICE OF PROPOSED AMENDMENTS

<table>
<thead>
<tr>
<th>Dementia care unit is IDPH certified</th>
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</table>

**Psychiatric Rehabilitation Services**

<table>
<thead>
<tr>
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<th>MDS items</th>
<th>Description</th>
<th>Unl</th>
<th>Lie</th>
<th>SW</th>
<th>Act</th>
</tr>
</thead>
<tbody>
<tr>
<td>IV</td>
<td>Hdd = 1 or</td>
<td>Anxiety Disorder</td>
<td>20</td>
<td>10</td>
<td>20</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Hff = 1 or</td>
<td>Manic depression (bipolar)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Hgg = 1 or</td>
<td>Schizophrenia</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>V</td>
<td>Jle = 1 or</td>
<td>Delusions in last 7 days</td>
<td>24</td>
<td>12</td>
<td>30</td>
<td>5</td>
</tr>
<tr>
<td></td>
<td>Jhi = 1</td>
<td>Hallucinations in last 7 days</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Lev</th>
<th>MDS items</th>
<th>Description</th>
<th>Unl</th>
<th>Lic</th>
<th>SW</th>
<th>Act</th>
</tr>
</thead>
<tbody>
<tr>
<td>I</td>
<td>P1ai = 1 or</td>
<td>Perform suctioning</td>
<td>5</td>
<td>15</td>
<td></td>
<td>RN</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>15</td>
</tr>
<tr>
<td></td>
<td>P1aj = 1 or</td>
<td>Administered trach care</td>
<td></td>
<td></td>
<td></td>
<td>LPN</td>
</tr>
<tr>
<td></td>
<td>P1bdA = 7</td>
<td>Respiratory therapy</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>II</td>
<td>P1ai = 1 or</td>
<td>Performed suctioning</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>AND</td>
<td></td>
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</tr>
</tbody>
</table>
DEPARTMENT OF HEALTHCARE AND FAMILY SERVICES

NOTICE OF PROPOSED AMENDMENTS

P1aj = 1  Administered trach care
AND
P1bdA > 0  Respiratory therapy

A $50.00 add-on cost will be applied to all residents receiving trach care.

### Ventilator Care

<table>
<thead>
<tr>
<th>Lev</th>
<th>MDS items</th>
<th>Description</th>
<th>Unl</th>
<th>Lic</th>
<th>SW</th>
<th>Act</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>P1a1 = 1</td>
<td>Receiving ventilator care</td>
<td>5</td>
<td>35</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

A $150.00 add-on cost shall be applied to all residents receiving ventilator care. The trach add-on cost shall not be included.

### Weaning From Ventilator

<table>
<thead>
<tr>
<th>Lev</th>
<th>MDS items</th>
<th>Description</th>
<th>Unl</th>
<th>Lic</th>
<th>SW</th>
<th>Act</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>P1a1 = 0 on current MDS AND P1a1 = 1 on previous MDS</td>
<td>Resident no longer on ventilator</td>
<td>5</td>
<td>15</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Resident previously on ventilator</td>
<td></td>
<td>15</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Morbid Obesity

<table>
<thead>
<tr>
<th>Lev</th>
<th>MDS items</th>
<th>Description</th>
<th>Unl</th>
<th>Lic</th>
<th>SW</th>
<th>Act</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>I3 = 278.01 AND</td>
<td>ICD9 for morbid obesity is marked</td>
<td>20</td>
<td>7.5</td>
<td></td>
<td>5</td>
</tr>
</tbody>
</table>

|     |           |                                        |     | 7.5 |    |     |
|     |           |                                        |     | 7.5 |    |     |
|     |           |                                        |     | LPN |    |     |
NOTICE OF PROPOSED AMENDMENTS

| K5e = 1 AND K5h = 1 AND G1aA = 3 and G1aB = 3 or G1bA = 3 and G1bB = 3 or G1cA = 3 and G1cB = 3 AND P3d = 7 or P3e = 7 or P3f = 7 |
| On a therapeutic diet On planned weight change program Extensive assist Requires 2+ assist with bed mobility Extensive assist Requires 2+ assist with transfers Extensive assist Requires 2+ assist with walk in room On bed mobility restorative On transfer restorative On walking restorative |

$40.00 add-on shall be applied to all residents meeting the Morbid Obesity category.

**Complex Wounds**

There are no minutes assigned to this area. It is strictly a $15.00 add-on applied to residents meeting the following criteria.

<table>
<thead>
<tr>
<th>MDS item</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>M1c or M1d ≥ 1 AND M2a ≥ 1 or</td>
<td>Presence of stage 3 or 4 PU Type of ulcer, pressure</td>
</tr>
</tbody>
</table>
DEPARTMENT OF HEALTHCARE AND FAMILY SERVICES

NOTICE OF PROPOSED AMENDMENTS

| M2b ≥ 1 AND B1 = 1 or G1Aa = ¾ or G1Ab = ¾ AND any 3 of the follow: ICD 9 codes of (260, 261, 262, 263.0, 263.1, 262.2, 263.8, 263.9) ICD 9 585 I1a = 1 I1qq = 1 I1j = 1 I1x = 1 I1z = 1 I1w = 1 J5c = 1 H1a = 4 H1b = 4 J1c = 1 G6a = 1 J2a = 2 M3 = 1 AND all of the following: M5a = 1 and/or M5b = 1 AND M5c = 1 AND M5d = 1 AND M5e = 1 | Type of ulcer, stasis Comatose Bed mobility (extensive) Transfer (extensive) ICD 9-Malnutrition ESRD Diabetes Mellitus Renal Failure Peripheral vascular disease Paraplegia Quadriplegia Multiple Sclerosis End stage disease Incontinence of bowel Incontinence of bladder Dehydration Bedfast Pain daily History of resolved ulcers Pressure relieving device/chair Pressure relieving device/bed Turn and position Nutrition or hydration Ulcer care |
## Traumatic Brain Injury

There are no minutes assigned to this area. It is strictly a $50.00 add-on applied to residents meeting the following criteria.

<table>
<thead>
<tr>
<th>MDS item</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>I1cc = 1</td>
<td>Traumatic brain injury</td>
</tr>
<tr>
<td>AND</td>
<td></td>
</tr>
<tr>
<td>B1 = 0</td>
<td>Not comatose</td>
</tr>
<tr>
<td>AND</td>
<td></td>
</tr>
<tr>
<td>S1 = 0</td>
<td>Does not meet Subpart S criteria</td>
</tr>
<tr>
<td>AND</td>
<td></td>
</tr>
<tr>
<td>E4aA = 3 and E4aB = 1</td>
<td>Wandering daily and alterability</td>
</tr>
<tr>
<td>or</td>
<td></td>
</tr>
<tr>
<td>E4bA = 3 and E4bB = 1</td>
<td>Verbally abusive behavioral symptoms daily and alterability</td>
</tr>
<tr>
<td>or</td>
<td></td>
</tr>
<tr>
<td>E4cA = 3 and E4cB = 1</td>
<td>Physically abusive behavioral symptoms daily and alterability</td>
</tr>
<tr>
<td>or</td>
<td></td>
</tr>
<tr>
<td>E4dA = 3 and E4dB = 1</td>
<td>Socially inappropriate/disruptive behavioral symptoms daily and alterability</td>
</tr>
<tr>
<td>or</td>
<td></td>
</tr>
<tr>
<td>E4eA = 3 and 34eB = 1</td>
<td>Resists care daily and alterability</td>
</tr>
<tr>
<td>AND</td>
<td></td>
</tr>
<tr>
<td>P1beA = 1</td>
<td>Psychological therapy</td>
</tr>
<tr>
<td>AND</td>
<td></td>
</tr>
<tr>
<td>P2a = 1</td>
<td>Special behavior symptom evaluation</td>
</tr>
<tr>
<td>AND</td>
<td></td>
</tr>
<tr>
<td>P2b = 1</td>
<td>Evaluation by a mental health specialist in last 90 days</td>
</tr>
</tbody>
</table>

### Special Patient Need Factors

#### Communication

<table>
<thead>
<tr>
<th>Count</th>
<th>MDS items</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>86</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
NOTICE OF PROPOSED AMENDMENTS

<table>
<thead>
<tr>
<th>Count</th>
<th>MDS items</th>
<th>Description</th>
<th>Staff Minutes</th>
</tr>
</thead>
<tbody>
<tr>
<td>I</td>
<td>D1 &gt; 0 or</td>
<td>Vision impaired to Severely impaired</td>
<td>2% of all staff time accrued in all categories from ADLs through Exceptional CareMental Health</td>
</tr>
<tr>
<td></td>
<td>D2a = 1 or</td>
<td>Decreased peripheral vision</td>
<td></td>
</tr>
<tr>
<td></td>
<td>D2b = 1</td>
<td>Experience halos around lights, light flashes</td>
<td></td>
</tr>
</tbody>
</table>

Vision Problems

<table>
<thead>
<tr>
<th>Count</th>
<th>MDS items</th>
<th>Description</th>
<th>Staff Minutes</th>
</tr>
</thead>
<tbody>
<tr>
<td>I</td>
<td>C4 &gt; 0 or</td>
<td>Deficit in making self understood</td>
<td>1% of all staff time accrued in all categories from ADLs through Exceptional CareMental Health</td>
</tr>
<tr>
<td></td>
<td>C6 &gt; 0</td>
<td>Deficit in understanding others</td>
<td></td>
</tr>
</tbody>
</table>

Accident/Fall Prevention

<table>
<thead>
<tr>
<th>Count</th>
<th>MDS items</th>
<th>Description</th>
<th>Staff Minutes</th>
</tr>
</thead>
<tbody>
<tr>
<td>I</td>
<td>J1f = 1 or</td>
<td>Dizziness</td>
<td>3% of all staff time accrued in all categories from ADLs through Exceptional CareMental Health</td>
</tr>
<tr>
<td></td>
<td>O4a-d = 7 or</td>
<td>Medications</td>
<td></td>
</tr>
<tr>
<td></td>
<td>H1b &gt; 0 or</td>
<td>Incontinent</td>
<td></td>
</tr>
<tr>
<td></td>
<td>G3a &gt; 0 or</td>
<td>Unable to maintain position as required for balance test while standing</td>
<td></td>
</tr>
<tr>
<td></td>
<td>G3b &gt; 0 or</td>
<td>Unable to maintain position as required for balance test while sitting</td>
<td></td>
</tr>
</tbody>
</table>
DEPARTMENT OF HEALTHCARE AND FAMILY SERVICES

NOTICE OF PROPOSED AMENDMENTS

| J4a = 1 or | Fell in past 30 days |
| J4b = 1 or | Fell in past 31-180 days |
| J1n = 1 or | Has unsteady gait |
| E4aA > 0   | Wandered in last 7 days |

**Restraint Free**

<table>
<thead>
<tr>
<th>Count</th>
<th>MDS items</th>
<th>Description</th>
<th>Staff Minutes</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>P4c &gt; 1</td>
<td>Used trunk restraint daily in last 7 days</td>
<td>2% of all staff time accrued in all categories from ADLs through Exceptional CareMental Health</td>
</tr>
<tr>
<td></td>
<td>P4d &gt; 1</td>
<td>Used limb restraint daily in last 7 days</td>
<td></td>
</tr>
<tr>
<td></td>
<td>P4e &gt; 1</td>
<td>Used chair that prevents rising daily in last 7 days</td>
<td></td>
</tr>
<tr>
<td>And</td>
<td>P4c = 0 and</td>
<td>Not used trunk restraint in last 7 days</td>
<td></td>
</tr>
<tr>
<td></td>
<td>P4d = 0 and</td>
<td>Not used limb restraint in last 7 days</td>
<td></td>
</tr>
<tr>
<td></td>
<td>P4e = 0</td>
<td>Not used chair that prevents rising in last 7 days</td>
<td></td>
</tr>
</tbody>
</table>

**Activities**

<table>
<thead>
<tr>
<th>Count</th>
<th>MDS items</th>
<th>Description</th>
<th>Staff Minutes</th>
</tr>
</thead>
</table>
### DEPARTMENT OF HEALTHCARE AND FAMILY SERVICES

#### NOTICE OF PROPOSED AMENDMENTS

<table>
<thead>
<tr>
<th>Condition</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>N2 = 0 or 1 AND N2 = 0 or 1 AND Any of the following checked:</td>
<td><strong>Average time involved in activities: Involved in activities more than ( \frac{1}{3} ) of time</strong></td>
</tr>
<tr>
<td>(G6a = 1 or C4 &gt; 1 or C6 &gt; 1 or E1o &gt; 0 or (AA3-a3a) / 365.25 ( \leq 50 ) or E1p &gt; 0 or E4a-e &gt; 0 or E4A &gt; 0 or E4bA &gt; 0 or E4cA &gt; 0 or E4dA &gt; 0 or E4eA &gt; 0 or</td>
<td></td>
</tr>
</tbody>
</table>

- **Bedfast all or most of the time**
- **Sometimes too or rarely or never understood**
- **Withdraws from activities of interest more than 5 days a week**
- **Age is 50 or younger or Resident is 50 years of age or younger at the time of the assessment reference date**
- **Reduces social interactions**
- **Any behavioral symptoms**
  - **Wandering in last 7 days**
  - **Verbally abusive in last 7 days**
  - **Physically abusive in last 7 days**
  - **Inappropriate or disruptive behavior in last 7 days**
  - **Resists care**
## NOTICE OF PROPOSED AMENDMENTS

<table>
<thead>
<tr>
<th>Condition</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>G4bB &gt; 0 or</td>
<td>Limited ROM voluntary movement of arm</td>
</tr>
<tr>
<td>G4cB &gt; 0 or</td>
<td>Limited ROM voluntary movement of hand</td>
</tr>
<tr>
<td>G4dB &gt; 0 or OR</td>
<td>Any limited ROM voluntary movement of leg</td>
</tr>
<tr>
<td>N2 = 0 or 1 AND</td>
<td>Average time involved in activities</td>
</tr>
<tr>
<td>E2 &gt; 0 AND</td>
<td>Mood persistence</td>
</tr>
<tr>
<td>E1a &gt; 0 or AND</td>
<td>Negative Made negative statements</td>
</tr>
<tr>
<td>E1n &gt; 0 or AND</td>
<td>Makes Repetitive repetitive physical movements</td>
</tr>
<tr>
<td>E4eA &gt; 0 or AND</td>
<td>Resists Resisted care in last 7 days</td>
</tr>
<tr>
<td>E1o &gt; 0 or AND</td>
<td>Withdraws from activities of interest more than 5 days a week</td>
</tr>
<tr>
<td>E1p &gt; 0 or AND</td>
<td>Reduced social interaction</td>
</tr>
<tr>
<td>E1j &gt; 0 or AND</td>
<td>Unpleasant mood in morning more than 5 days a week</td>
</tr>
<tr>
<td>N1d &gt; 0 or AND</td>
<td>Not awake all or most of the time</td>
</tr>
</tbody>
</table>
NOTICE OF PROPOSED AMENDMENTS

<table>
<thead>
<tr>
<th>$Elg &gt; 0$ or</th>
<th>Statements that something terrible will happen</th>
</tr>
</thead>
<tbody>
<tr>
<td>$K3a = 1$ or</td>
<td>Weight loss</td>
</tr>
<tr>
<td>$(N1a,b,c \leq 1 \text{ AND } B1 = 0)$ or</td>
<td>Not awake all or most of the time</td>
</tr>
<tr>
<td>$Elg &gt; 0$ or</td>
<td>Not comatose</td>
</tr>
<tr>
<td>$K3a = 1$</td>
<td>Repeated statements that something terrible will happen</td>
</tr>
<tr>
<td></td>
<td>Weight loss (5% in 30 days or 10% in 180 days)</td>
</tr>
</tbody>
</table>

(Source: Amended at 30 Ill. Reg. ______, effective ___________)
DEPARTMENT OF MILITARY AFFAIRS

NOTICE OF PROPOSED REPEALER

1) **Heading of the Part:** Rental of National Guard Armories

2) **Code Citation:** 71 Ill. Adm. Code 1510

3) **Section Numbers:**
   - 1510.100  Repeal
   - 1510.110  Repeal
   - 1510.120  Repeal
   - 1510.130  Repeal
   - 1510.140  Repeal
   - 1510.150  Repeal
   - 1510.200  Repeal
   - 1510.210  Repeal
   - 1510.220  Repeal
   - 1510.300  Repeal
   - 1510.310  Repeal
   - 1510.320  Repeal
   - 1510.330  Repeal
   - 1510.340  Repeal
   - 1510.350  Repeal
   - 1510.Appendix A  Repeal
   - 1510.Appendix B  Repeal

4) **Statutory Authority:** Section 65 of the Military Code of Illinois [20 ILCS 1805/65]

5) **A Complete Description of the Subjects and Issues Involved:** This repealer applies to the Code governing the Armory Rental Program and Armory Rental Fund as previously administered by the Department of Military Affairs (DMA). In order to comply with revised federal security, legal, and funding requirements, and the rules governing the use of National Guard facilities the practice of "rental" of National Guard Armories has been eliminated. DMA has rescinded the existing regulation and published a new governing military regulation (DMAIL 210-2 dated January 9, 2006). The Code covering this program must therefore be repealed.

Under the provisions of DMAIL 210-2 dated January 9, 2006, no new rental agreements may be entered into under the former program guidelines and all existing long-term rental contracts will terminate no later than June 30, 2006 to be replaced by Intergovernmental Agreements (IA) for those entities that are eligible.
DEPARTMENT OF MILITARY AFFAIRS

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Under the new rules, use of DMA facilities by military and governmental entities will be through the use of IA rather than rental contracts, and IA's will require only reimbursement of Identifiable Incremental Costs (IIC). Also under the new rules, DMA facilities will not normally be available for use by non-military or non-governmental activities, except for those entities that are specifically affiliated with the military or authorized by federal statute. All other non-governmental entities will be required to demonstrate the non-availability of any commercial facilities within the area and to pay fair market value for the use of the facility.

Subject to such reasonable regulations as may be promulgated by the Adjutant General, the use and rental of armories may be permitted for any reasonable and legitimate civilian activities so long as the activities do not interfere with their use for military purposes. Proceeds received from rentals, above the expenses incident to the use, will be placed in an "Armory Rental Account" by the Adjutant General and used for recruiting, athletic, and recreational activities and other purposes in the interest and for the benefit of the personnel of the Illinois National Guard. Expenditures of those proceeds must be made on a modified per capita basis with due consideration given to the proportion of each armory's generation of revenue, as determined by the Adjutant General. (Source: 20 ILCS 1805/65)

The Armory Rental Fund (416) – Proceeds received from armory rentals are deposited into this fund. The monies received are used for recruiting, athletic, and recreational activities and other purposes in the interest and for the benefit of the personnel of the Illinois National Guard. Expenditures of the proceeds are made on a modified per capita basis with due consideration given to the proportion of each armory's generation of revenue, as determined by the Adjutant General.

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

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

8) Does this repealer contain incorporations by reference? No

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

10) Statement of Statewide Policy Objective: This repealer will eliminate rules covering a program that no longer exists.
DEPARTMENT OF MILITARY AFFAIRS

NOTICE OF PROPOSED REPEALER

11) Time, Place, and Manner in which interested persons may comment on this proposed rulemaking: Persons who wish to comment on this proposed repealer may submit written comments no later than 45 days after the publication of this Notice to:

   Lieutenant Colonel Wayne Carlson (ILANG) or
   Lieutenant Colonel Robert Roth (ILARNG)
   Staff Judge Advocate
   Department of Military Affairs
   Camp Lincoln
   1301 North MacArthur Boulevard
   Springfield, Illinois  62702

   217-761-3740

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 repealer was summarized: This rulemaking was not included on either of the two most recent regulatory agendas because: the Division did not anticipate the need to repeal this rulemaking.

The full text of the Proposed Repealer begins on the next page:
DEPARTMENT OF MILITARY AFFAIRS

NOTICE OF PROPOSED REPEALER

TITLE 71: PUBLIC BUILDINGS, FACILITIES, AND REAL PROPERTY
CHAPTER III: DEPARTMENT OF MILITARY AFFAIRS

PART 1510
RENTAL OF NATIONAL GUARD ARMORIES (REPEALED)

SUBPART A: POLICIES REGARDING RENTAL OF NATIONAL GUARD ARMORIES

Section
1510.100  General Policy
1510.110  Insurance Requirements
1510.120  Use by Civilian Agencies
1510.130  Long-Term Space Rental and Extended Contracts
1510.140  Alcoholic Beverage Policy
1510.150  Areas Available for Rental

SUBPART B: RESTRICTIONS ON RENTAL OF NATIONAL GUARD ARMORIES

Section
1510.200  Restrictions on Rental Activities
1510.210  Measures Required to Prevent Armory Damage
1510.220  Armory Indoor Range Rental

SUBPART C: STANDARD LEASE REQUIREMENTS

Section
1510.300  Lease Procedures and Preparation of Paperwork
1510.310  Payment of Rental Fees
1510.320  Security Requirements
1510.330  Clean-up of Armory Facilities After Use
1510.340  Termination of Lease
1510.350  Hold Harmless Provision
1510.APPENDIX A  Armory Rental Contract Worksheet
1510.APPENDIX B  Armory Rental Rate Sheet

AUTHORITY: Implementing and authorized by Section 65 of the Military Code of Illinois [20 ILCS 1805/65].

SOURCE: Adopted at 13 Ill. Reg. 5098, effective March 10, 1989; repealed at 30 Ill. Reg. _____, effective ____________.
SUBPART A: POLICIES REGARDING RENTAL OF NATIONAL GUARD ARMORIES

Section 1510.100 General Policy

It is the policy of the Adjutant General that Illinois National Guard armories will be made available for reasonable and legitimate activities and, to that end, armory managers and maintenance/janitorial supervisors (hereinafter referred to as "armory managers") will allow such use.

Section 1510.110 Insurance Requirements

a) Proof of insurance is required. A certificate of insurance issued by the company/broker must be returned to the Office of the Adjutant General along with the signed contract and must indicate that the lessee's insurance coverage extends to the armory by armory name and address.

b) Dram shop coverage is required in addition to liability and property loss/damage for any event selling or serving alcohol.

c) Exceptions to the requirement for insurance are:

1) Rental to other state or federal agencies; and

2) Use by military units for social activities or other unit-sponsored activities. However, if liquor is sold/dispensed, dram shop insurance is required.

Section 1510.120 Use by Civilian Agencies

a) Use as a Polling Place: Armory space will be made available as a polling place without charges. Armory clean-up and security will be provided from Department resources.

b) Use as an Emergency Evacuation Shelter: The Adjutant General will consider the use of an armory as an emergency evacuation shelter for hospitals, nursing homes and the like (for periods not exceeding 72 hours) as part of an institutional plan to cope with disasters. However, such prospective users will be advised that in a disaster, the National Guard may need the facility for disaster aid operations at the direction of the Governor.
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Section 1510.130 Long-Term Space Rental and Extended Contracts

Prior to entering into any rentals requiring long-term relinquishment of space (i.e., either office, classroom or assembly areas), a letter prepared by the armory manager will be forwarded through military channels to the Assistant Adjutant General – Army, Department of Military Affairs, hereinafter referred to as DMAIL, for review of impact on the Illinois National Guard mission by the loss or reduced availability of the space (e.g., interference with training or operations). The Assistant Adjutant General – Army will advise the Adjutant General on suitability of the rental. Armory rental, vending machine contracts or concession contracts cannot be for more than one year. Charges for these contracts will be computed for the entire rental period when the contract worksheet (see Section 1510.Appendix A) is prepared, and the lessee will submit payment for at least one month's use when the contract is signed. All charges for succeeding months use will be paid within 15 days after receipt of a monthly billing from the Office of the Adjutant General.

Section 1510.140 Alcoholic Beverage Policy

a) Alcoholic liquors may be delivered to and sold at retail in any building used as an Illinois State Armory provided:

1) The lessee obtains State and local liquor licenses, and submits them to the Office of the Adjutant General prior to the event;

2) The lessee selling or dispensing the alcoholic liquors has provided dram shop liability insurance so as to save harmless the facility and the State from all financial loss, damage or harm; and

3) If catered, the caterer must have the required liquor licenses and dram shop insurance to dispense alcoholic beverages for a lessee in the armory.

b) When liquor is not served or sold during rentals, signs must be posted in prominent places stating that all alcoholic beverages are prohibited. If tickets are to be printed by organizations for functions to be held in the armory where no liquor is served or dispensed, a "No Liquor On Premises" statement must be imprinted on the tickets.

Section 1510.150 Areas Available for Rental

The following armory areas will be considered for rental:
DEPARTMENT OF MILITARY AFFAIRS

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a) Assembly area;

b) Classrooms;

c) Supporting restroom facilities;

d) Indoor ranges; and

e) Armory's kitchen facilities, but only with qualified National Guard personnel on hand to supervise the use and clean-up.

SUBPART B: RESTRICTIONS ON RENTAL OF NATIONAL GUARD ARMORIES

Section 1510.200 Restrictions on Rental Activities

a) Neither the lessee, nor any exhibitor or merchant occupying floor space will engage in the sale of merchandise or services of any kind without prior approval of the Adjutant General. When deciding whether to grant such approval, the Adjutant General will consider the following factors:

1) Whether there will be damage to armory property as a result of the rental;

2) Whether the event will endanger the community, armory personnel, or participants;

3) Whether the merchandise or services are of an obscene or lewd nature; and

4) Whether the armory can accommodate the anticipated event or crowds.

b) The armory will not be rented to any organization or individual for any of the following or similar functions:

1) Professional sports;

2) Midget auto racing;

3) Roller skating;

4) Gambling of any kind;
DEPARTMENT OF MILITARY AFFAIRS

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5) Obscene or lewd entertainment; and

6) Rock concerts.

Section 1510.210 Measures Required to Prevent Armory Damage

a) The armory will not be rented when such use will cause damage to the floor or other facilities (e.g., heavy equipment). In any event where vehicles are to be on the floor, they must be drained of gasoline prior to being moved in and the floor properly protected from oil drippings.

b) The armory will not be rented for any use where liquified petroleum gases in any form are involved.

c) Arrangements for heavy electrical loads for rentals must be arranged between the lessee and local utility company. Payments for extra electricity will be made by the lessee directly to the utility. The electrical panel boxes in the armory will not be used for running additional power cables.

d) The lessee will make no alterations or additions to the armory without the written approval of the Adjutant General. The lessee is liable to the State of Illinois for damages arising out of the use of the armory. In deciding whether to allow a requested alteration or addition, the Adjutant General will consider the following factors:

1) Whether the alteration or addition will damage armory property;

2) Whether the alteration or addition will be dangerous or hazardous (e.g., exposed electrical cable);

3) Whether the alteration or addition will affect military operations or training or future rentals;

4) Whether the alteration or addition will adversely affect the appearance of the armory (e.g., bright paint); and

5) Whether the alteration or addition will be temporary or permanent.

e) No smoking will be permitted on the armory floor.
Section 1510.220  Armory Indoor Range Rental

a) The lessee must agree that all firing will be done under the supervision of competent instructors, and that there will be a minimum of two persons present on the range when the range is in use. Safety precautions will be strictly adhered to at all times, and the armory manager shall have the right to close the range at any time such precautions are not being followed. Arms and ammunition must adhere to the following specifications: only .22 caliber rifles will be used in armory ranges; handguns up to .45 caliber are authorized. All ammunition must be non-jacketed, low velocity.

b) State and federal law enforcement agencies may use indoor ranges without providing insurance coverage. County and municipal law enforcement agencies will provide proof of self-insurance or proof of insurance policy coverage.

c) Gun clubs and other private groups renting the range must provide insurance coverage.

d) Prior to use, the lessee must provide the armory manager with a list identifying those individuals who will use the range. Each person using the range must sign in and out on a log furnished by the armory manager.

SUBPART C: STANDARD LEASE REQUIREMENTS

Section 1510.300  Lease Procedures and Preparation of Paperwork

In order to initiate the rental of an armory, the interested party should contact the armory manager who will prepare an Armory Rental Contract Worksheet (DMAIL Form 22) for each lease. See Section 1510.Appendix A. Rent, operating costs, security and clean-up costs, and any additional costs will be computed and recorded on the worksheet, but the armory manager will not collect monies from the lessee. The armory manager will brief the lessee on the rental and insurance requirements. The worksheet will then be forwarded to the Administrative Assistant at the Office of the Adjutant General where, if the proposed rental is approved, a contract will be drafted and sent to the lessee for approval and signature.

Section 1510.310  Payment of Rental Fees

a) The Administrative Assistant will prepare a bill in accordance with the rate schedule shown at Section 1510.Appendix B for the rental payment and forward it to the lessee with the proposed contract. The lessee will return the signed
contract, check, proof of insurance, and any other required documentation to the Administrative Assistant.

b) Unless other arrangements are made with the armory manager at the time of preparation of the armory rental worksheet, the lessee will submit payment in full for a one-time rental of the armory at the time the contract is signed. In all other cases, the lessee will pay all bills in full within 15 days after receipt.

Section 1510.320 Security Requirements

a) All after-normal-duty-hours rentals require that the facility and the military equipment be safeguarded by National Guard personnel. The lessee will be charged for the required security personnel if they are not normally working at the time of the event.

b) Security personnel are accountable to the armory manager and not to the lessee. They are hired to insure that the facility and government property are safeguarded. They will not be engaged in maintaining order or crowd control at the lessee's activity.

Section 1510.330 Clean-up of Armory Facilities After Use

a) Clean-up after a rental will be accomplished within 24 hours to an "as found" condition as determined by the armory manager who shall inspect the area prior to the rental with a representative of the lessee if he desires to be present. This is the lessee's responsibility to either clean the armory or hire personnel to clean the armory. If the lessee desires, the armory manager is authorized to hire personnel for this task and charge the lessee.

b) If clean-up is done by the lessee, it will be under the supervision of and to the standards of the armory manager.

Section 1510.340 Termination of Lease

The Adjutant General reserves the right to terminate the lease without notice to the lessee whenever the armory is required for military purposes (e.g. training or Federal mobilization) or disaster aid operations at the direction of the Governor. In all other cases, either the Adjutant General or the lessee may terminate the lease upon two weeks' advance notice, in writing, to the other party.
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Section 1510.350  Hold Harmless Provision

All lessees, except State and Federal agencies or military units, will be required to enter into "hold harmless" agreements to provide for indemnification of the State of Illinois or its agents and employees.
Section 1510. APPENDIX A  ARMORY RENTAL CONTRACT WORKSHEET

1. ARMORY: _______________  MANAGER: _______________

2. LESSEE (Complete name of Organization) ________________________________

ADDRESS: __________________ , __________________ , ______________

   Street  City  Zip

PHONE: ________________________________

IF APPLICABLE:

   Illinois Tax Number ________________________________

   Federal Tax-Exempt Number ________________________________

   Not-For-Profit Certification Number ________________________________

3. PERSONS AUTHORIZED TO REPRESENT LESSEE:
   (Contract will be mailed to this address for signature.)

   Name: ________________________________

   SSN: ________________________________

   Address: ________________________________

   City, St, Zip: ________________________________

   Phone:  Business: ___________  Home: ___________

4. DESCRIBE IN DETAIL HOW THE ARMORY WILL BE USED: ____________________

   ________________________________

   ________________________________
5. WILL THERE BE INCOME TO THE LESSEE BECAUSE OF THIS USE THROUGH:

a. Ticket sales  ___________  Program sales  ___________

b. Sale of Advertising  ___________  Concessions  ___________

c. Contributions  ___________  Vending  ___________

d. Subletting  ___________  Other  ___________

6. HOW IS THE LESSEE USING THE INCOME FROM THIS RENTAL:


7. ESTIMATED NUMBER OF PEOPLE ATTENDING THE EVENT:  ____________

8. DATE/HRS REQUESTED:  (attach schedule sheet if required)


9. Will alcohol be served  ___________  or sold  ___________

   Yes or No  Yes or No

10. AREAS OF ARMORY TO BE RENTED:

    Assembly area:  __________ (Includes supporting hallways and restrooms

    Classrooms:  Room numbers or identification  ____________

11. INSURANCE

    I understand I MUST submit a certificate of insurance as proof of liability and property damage coverage along with the signed contract. I understand also that if liquor is to be served, I will be required to show proof of Dram Shop Insurance. The insurance certificate must reflect that liability and property damage/loss coverage has been extended to the armory being rented.

12. RENTAL CHARGES:

    a. Total number of hours this rental (to be multiplied times the  __________
DEPARTMENT OF MILITARY AFFAIRS

NOTICE OF PROPOSED REPEALER

hourly rate shown in Appendix B which includes routine clean-up and security charges).

b. Subletting fees (if applicable). Number of spaces to be sublet: _____; at $_____ each, for a total of $_____. DMAIL fee – 15% of total:


c. Total number of hours Armory Manager administration (preparation of payrolls and rental oversight)


d. Adjustments to rental charges (to be multiplied times the hourly fee for that service as shown in Appendix B); may be adjusted upward or downward:

1. Total of number of hours clean-up required:

   a) By DMAIL janitorial personnel
   b) By personnel hired by DMAIL pursuant to contractor's authorization

2. Total number of hours security required:

   a) By security personnel during normal duty hours
   b) By personnel hired by DMAIL during non-duty hours pursuant to contractor's authorization

13. How is contract to be paid:

   a. Paid in advance in full when contract is signed (required payment method for all one-time use rentals and lessee's option for all others)
   b. *Semi Annually
   c. *Quarterly
   d. *Monthly
DEPARTMENT OF MILITARY AFFAIRS

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* Lessee's option for all leases except one-time use rentals – payments will be due 15 days after each billing from DMAIL

I have read the foregoing and understand the charges for my rental will be determined by the Office of the Adjutant General upon receipt of this worksheet, and that a contract will be prepared and forwarded to me for my signature. I further understand that I am under no obligation to enter into this contract when forwarded to me for signature.

_____________________________________________________________________

Lessee's Signature

I recommend approval of the proposed rental on the term described on this worksheet.

_____________________________________________________________________

Armory Manager

ALL QUESTIONS MUST BE ANSWERED TO ENSURE PROMPT PROCESSING OF CONTRACT, IF NOT APPLICABLE ENTER N/A.
DEPARTMENT OF MILITARY AFFAIRS

NOTICE OF PROPOSED REPEALER

Section 1510. APPENDIX B  Armory Rental Rate Sheet

ARMORY RENTAL RATE SHEET

Rates shown include routine security and clean-up. Rates are subject to increase when an activity will require additional clean-up and/or security. Rates will be adjusted downward when an activity requires less than usual clean-up and security. Rates for clean-up and security are $8.00 for each hour required. Administration fees are $9.50 per hour. Fees for subletting are 15% of total planned space/exhibitor fees.

<table>
<thead>
<tr>
<th>HOURLY RATES</th>
<th>Assembly Area</th>
<th>Classroom</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Charities (with federal tax exempt number); or other groups which donate 100% of net profit to humanitarian efforts on behalf of the physically or mentally handicapped or the underprivileged, or for the treatment or prevention of illness.</td>
<td>25.50 36.40</td>
<td>19.00</td>
</tr>
<tr>
<td>2. Government Agencies (Federal, State, or local)</td>
<td>22.60 30.60</td>
<td>18.00</td>
</tr>
<tr>
<td>3. Park &amp; Recreation Districts for recreational programs; or school athletic programs/team practices</td>
<td>28.50 42.40</td>
<td>22.00</td>
</tr>
<tr>
<td>4. Not-for-profit groups organized under the Illinois GENERAL NOT FOR PROFIT CORPORATION ACT OF 1986 (Ill. Rev. Stat. 1987, ch. 32, par. 101.01, et seq.)</td>
<td>33.00 51.40</td>
<td>25.00</td>
</tr>
<tr>
<td>5. Other persons, groups, or organizations</td>
<td>48.00 81.40</td>
<td>32.00</td>
</tr>
</tbody>
</table>

*Broadway, Chicago Avenue, General Jones, Northwest and Rockford Armories.

Rates for Indoor Ranges (Beardstown, Marseilles, North Riverside and Springfield only). Use by any group is limited to 2 hours per week at Marseilles and Springfield. Rates include routine
DEPARTMENT OF MILITARY AFFAIRS

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clean-up and security.

1. Government Agencies: $ 16.00 per hour

2. All Others: $ 20.00 per hour
DEPARTMENT OF HUMAN RIGHTS

NOTICE OF ADOPTED AMENDMENTS

1) **Heading of the Part**: Procedures of the Department of Human Rights

2) **Code Citation**: 56 Ill. Adm. Code 2520

3) **Section Numbers**

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<tr>
<td>2520.700</td>
<td>Amendment</td>
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<td>2520.770</td>
<td>Amendment</td>
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<tr>
<td>2520.APPENDIX C</td>
<td>New Section</td>
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<tr>
<td>2520.APPENDIX D</td>
<td>New Section</td>
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4) **Statutory Authorities**: Implementing Articles 1 through 7B of the Illinois Human Rights Act [775 ILCS 5/Arts. 1 through 7B] and the Intergovernmental Cooperation Act [5 ILCS 220], and authorized by Sections 7-101(A) and 7-105(A) of the Illinois Human Rights Act [775 ILCS 5/7-101(A) and 7-105(A)].

5) **Effective Date of Amendments**: January 13, 2006

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**: September 9, 2005; 29 Ill. Reg. 13617

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

11) **Differences between proposal and final version**: Grammatical, punctuation or other nonsubstantive changes were made as agreed upon with JCAR.

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 HUMAN RIGHTS

NOTICE OF ADOPTED AMENDMENTS

15) Summary and Purpose of Amendments: Pursuant to Section 7A-102(B) of the Illinois Human Rights Act [775 ILCS 5/7A-102(B)], a respondent's failure to file a verified response within 60 days from receipt of a charge without good cause shall result in the issuance of a notice of default. Pursuant to Public Act 94-326 (effective July 26, 2005), this amendment defines good cause for failing to file a timely verified response. This amendment also enacts a procedure for a complainant to contest, and the Department to review, a respondent's untimely filed verified response.

Pursuant to Section 2-105(B)(1) of the Illinois Human Rights Act [775 ILCS 5/2-105(B)(1)], every State executive department, agency, board, commission, and instrumentality must comply with the Department's Rules and Regulations concerning equal employment opportunities and affirmative action. The amendments clarify that state agencies must follow the procedures established by the Department when preparing a layoff report, and identify the information and documentation required by the Department. The amendments also add definitions for the terms "layoff" and "region".

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

Brent A. Harzman
Staff Attorney
100 W. Randolph St., Ste. 10-100
Chicago, IL 60601

(312) 814-1906 or (312) 263-1579 (TTY)

The full text of the Adopted Amendments begins on the next page:
# DEPARTMENT OF HUMAN RIGHTS

## NOTICE OF ADOPTED AMENDMENTS

**TITLE 56: LABOR AND EMPLOYMENT**  
**CHAPTER II: DEPARTMENT OF HUMAN RIGHTS**

**PART 2520**  
PROCEDURES OF THE DEPARTMENT OF HUMAN RIGHTS

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2520.480 Complaint (Repealed)

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2520.710 Scope and Purpose
2520.720 Affirmative Action Groups
2520.730 Consideration of Additional Groups
2520.740 Definitions (Renumbered)
2520.750 Nondiscrimination (Repealed)
2520.760 Plans
2520.770 Reporting and Record-Keeping
2520.780 Equal Employment Opportunity Officers
2520.790 Complaint Process
2520.795 Compliance Reviews
2520.797 Sanctions for Noncompliance

2520.APPENDIX A Contents of Affirmative Action Plans
2520.APPENDIX B Value Weight Assignment Chart
2520.APPENDIX C Contents of Layoff Reports
2520.APPENDIX D Illinois Counties by Region

AUTHORITY: Implementing Articles 1 through 7B of the Illinois Human Rights Act [775 ILCS 5/Arts. 1 through 7B] and the Intergovernmental Cooperation Act [5 ILCS 220], and authorized by Sections 7-101(A) and 7-105(A) of the Illinois Human Rights Act [775 ILCS 5/7-101(A) and 7-105(A)].


SUBPART C: PROCEDURE UPON CHARGE
Section 2520.405 Verified Response to Charge

a) Pursuant to Section 7A-102(B) of the Act, within 60 days after receipt of the notice of the charge, respondent shall file a verified response to the allegations in the charge. Respondent shall serve a copy of the verified response on complainant or complainant's representative and shall show proof to the Department that the copy was served on complainant or complainant's representative.

b) Where, without good cause shown, respondent's verified response is not timely filed and/or served on complainant or complainant's representative, complainant may raise that issue before the Department. The raising of an issue of an untimely filed and/or served verified response with the Department does not relieve complainant of complainant's duty to comply with the Department's investigation.

c) Pursuant to Section 7A-102(B) of the Act, good cause for untimely filing a verified response may include, but shall not be limited to:

1) Death or sudden, serious illness of respondent or respondent's representative; or

2) Death or sudden, serious illness of an immediate family member of respondent or respondent's representative; or

3) Respondent filed and served a timely verified response, but the Department later determined that respondent's verified response was defective; or

4) Respondent acted with due diligence and was not deliberate or contumacious and did not unwarrantedly disregard the verified response process, as supported by affidavit or other evidence; or

5) Respondent's failure to timely file a verified response was due to circumstances beyond respondent's control, as supported by affidavit or other evidence.

d) Whether good cause exists is in the sole discretion of the Department.
e) Where respondent is responding to a notice to show cause for failing to timely file the verified response and/or timely serve a copy on complainant or complainant's representative, respondent shall include the verified response with the response to the notice to show cause and show proof that respondent has served the verified response on complainant or complainant's representative.

(Source: Added at 30 Ill. Reg. 1343, effective January 13, 2006)

SUBPART H: EQUAL EMPLOYMENT OPPORTUNITY AND AFFIRMATIVE ACTION BY STATE EXECUTIVE AGENCIES

Section 2520.700 Definitions

For purposes of this Subpart, the following terms shall have the meanings indicated:

Act – The term "Act" shall mean the Illinois Human Rights Act [775 ILCS 5].

Affirmative Action Group – The term "affirmative action group" shall mean any of the groups listed in Sections 2520.720 or 2520.730 of this Part.

Agency – The term "agency" shall mean any instrumentality or facility of the executive branch of State government, as specified in Section 2520.710 of this Part.

Central Management Services – The term "Central Management Services" shall mean the Department of Central Management Services or any successor agency responsible for its functions.

Chief Executive Officer – The term "Chief Executive Officer" shall mean the director or other chief executive or administrator of any agency other than the Department.

Department – The term "Department" means the Department of Human Rights.

Director – The term "Director" means the Director of the Department.

Disability – As used in Section 2-105(b) of the Act, "disability" means a mental or physical condition (other than pregnancy), lasting six months or longer, that limits the amount or kind of work an individual can perform.
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EEO Job Categories – The term "EEO job categories" refers to the following eight categories: officials/managers; professionals; paraprofessionals; technicians; office/clerical workers; protective services workers; skilled craft workers; and service/maintenance workers.

EEO Officer – The term "EEO Officer" means the Equal Employment Opportunity Officer, whether full or part-time, appointed by a State agency pursuant to Section 2-105(B)(4) of the Act and Section 5220.780 of this Part.

Layoff – the placement of an employee in non-paid and non-working status without prejudice, either temporarily or for an indeterminate length of time. Layoff does not include, either temporarily or indeterminately, a means or form of discipline.

Minority – The term "minority" or "minorities" refers to those groups, or members of a group thereof, listed in Section 2520.720 or 2520.730 of this Part, other than women and disabled persons.

Numerical Goals – The term "numerical goals" means the number of members of an affirmative action group that which have been determined to be available to an agency for employment in each of the EEO job categories.

Petitioning Group – The term "petitioning group" means a chartered not-for-profit organization that is recognized by the community it purports to represent that which has as its purpose fostering the interests and well being of that community.

Plan – The term "plan" shall mean an affirmative action plan for employment as described in Section 2520.760.

Program Goals – The term "program goals" means a set of actions established to address affirmative action or EEO problems cited in the agency's plan.

Reasonable Accommodation – The term "reasonable accommodation" as it relates to disabled employees and applicants, means modification of the work site, work
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process and/or work schedule to enable a disabled person to perform the major functions of a specific job; however, such an accommodation cannot impose an undue hardship on the conduct of the business of the employer or labor organization.

Region – a group of adjacent counties. There are 11 regions within Illinois as identified in Appendix D of this Part.

Underutilized Category – a category The term “underutilized category” means one in which the number of employed members of an affirmative action group for which numerical goals have been set does not reflect the availability of that group in the agency workforce in that EEO job category.

(Source: Amended at 30 Ill. Reg. 1343, effective January 13, 2006)

Section 2520.770 Reporting and Record-Keeping

a) Employment Profiles – As required by Section 2-105(B) of the Act, each agency shall maintain data reflecting the composition of its workforce in each region, by race, national origin as specified by the Department, sex and disability, EEO job categories, and any other category which the Department may require by rule. This information shall be collected from the agency's employees through the use of a form, developed by Central Management Services and approved by the Director, which shall be completed by each employee and applicant for employment at his/her option. Central Management Services shall compile this data and furnish quarterly reports to each agency and the Department depicting the employment profile of each agency under the Personnel Code [20 ILCS 415]. Other agencies, and agencies under the Code having non-Code employees, shall compile this data themselves and provide it to the Department.

b) Position Vacancies – Each agency shall maintain a centralized record detailing all its current and anticipated job openings, and indicating for each such opening the job title, EEO job category, pay grade or merit compensation level, and region geographical location. This information shall be supplied to the agency's EEO Officer, and to the Department upon request. Every agency shall also post conspicuously in its offices all vacancies in nonexempt positions that the agency intends to fill, if the vacant position is one where the proportion of incumbents in one or more affirmative action groups is significantly less than the proportion of those groups in the available local labor
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force. The posting shall also state that the agency is an Equal Opportunity Employer.

c) Quarterly Reports – No later than 15 working days after receipt of the CMS-DHR9 and CMS-DHR10 data information at the end of each fiscal quarter, every agency shall file with the Department a report. If an agency submits a written request for an extension within 15 working days after receipt of the CMS-DHR10 data information, the Director may grant an extension of up to 15 days. The report, signed by the EEO Officer and Chief Executive Officer, shall contain:

1) A current employment profile of each of the agency's departments or divisions by EEO job category and affirmative action group(s) of the incumbents.

2) A breakdown of all employment transactions for the previous quarter by EEO job category and the affirmative action group(s) of the employee(s) affected.

3) A statement on the agency's progress in meeting its numerical and/or program goals. If a numerical or program goal is not attained, the agency should provide an explanation for the failure to meet the goal.

4) A list of vacancies, by EEO job category, classification, and pay grade or merit compensation level, that the agency intends to fill during the next quarter. Underutilized categories should be indicated.

5) A narrative describing all charges and complaints of employment discrimination filed or pending against the agency during the previous quarter. The narrative should identify the region/facility or geographical location out of which the charge or complaint was filed; the organization with whom it was filed; and the current status of the matter, including whether pending, withdrawn, settled or dismissed.

d) Annual Reports – By August 15 of each year, every agency shall submit to the Department a report, signed by its EEO Officer and Chief Executive Officer. If an agency submits a written request for an extension before August 15, the Director may grant an extension of up to 30 days. The report shall include cumulative data for the full year of the same sort as required under subsection (c)(1) above, as well as a narrative by the agency's Chief Executive Officer describing the extent to which the agency's yearly numerical and program goals
were achieved and the reasons for any unmet goals.

e) Federal Compliance Reports – Any agency that is the subject of an EEO compliance review by the federal government shall forward to the Department a copy of any and all reports within 5 working days after the agency's receipt of the report.

f) Orders and Settlements – Any agency is a party to any proceedings, whether judicial or administrative, and whether federal or state, involving allegations of employment discrimination shall forward to the Department a copy of any order, decree, settlement agreement or award that decides or disposes of the proceedings within 15 days after the entry of the order, decree, settlement agreement or award.

g) Layoff Reports – Each agency shall prepare a layoff report outlining any intended layoff of incumbent employees, in accordance with the procedures established in Appendix C. The report shall be submitted to the agency's EEO Officer and the Department not less than 30 days prior to the expected date of the layoff, unless emergency conditions necessitate a delay of the report; however, the emergency conditions must be documented in the report. The report shall identify, by region, job title and affirmative action group, the employees to be affected by the layoff. The agency's EEO Officer shall review the report to determine if the layoff will have an adverse impact upon minorities, women or disabled persons. The EEO Officer shall submit a written adverse impact report to the Chief Executive Officer and to the Director of his/her findings and, if adverse impact is found, suggested alternatives to lessen or eliminate the impact. The Director of Central Management Services will not approve a layoff until the Director has indicated that the adverse impact report is correct.

h) Reorganization Reports – Any proposed workforce reorganization significantly changes lines of authority, wages or job duties and descriptions on an agency-wide basis, or throughout any bureau, division or unit of the agency, must be described in a reorganization report and submitted to the agency's EEO Officer at least 30 days prior to implementation. The agency's EEO Officer shall review the report to determine whether it will have an adverse impact upon minorities, women or disabled persons, and shall submit an adverse impact report, within 15 days after receipt of the reorganization report, to the agency's Chief Executive Officer and the Department. If the EEO Officer determines that an adverse impact is apparent, he/she shall include in the adverse impact report...
recommendations to lessen the such impact.

i) Hiring and Promotion Monitor – A hiring and promotion monitor shall be developed by each agency and completed on all hires and promotions, indicating the EEO job category and classifications of the position and whether it is an underutilized category. The monitor shall also indicate the race, sex, whether disabled, and national origin of all persons considered for the position and of the candidate, and whether the candidate meets the affirmative action requirements for that category. If the candidate does not meet the affirmative action requirements for that category, a detailed explanation indicating the reasons for the desired selection must be completed by the hiring officer and attached to the monitor. No hire or promotion commitment shall be made until the agency EEO Officer, or designee, has reviewed and signed the monitor indicating approval of the transaction. Central Management Services shall not complete any hire or promotion transaction if it has not received the approved monitor.

j) Exit Questionnaire – Each agency shall provide an exit questionnaire to employees at the time of their separation from employment, whether voluntary or involuntary. The questionnaire shall identify the employee by name and affirmative action group, job title and region location, date of separation, and reason(s) for separation, and shall include space for the employee's comments. Completion of the questionnaire shall be at the employee's option. Completed questionnaires shall be forwarded immediately to the agency's EEO Officer.

(Source: Amended at 30 Ill. Reg. 1343, effective January 13, 2006)
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Section 2520. APPENDIX C  Contents of Layoff Reports

a) When a State agency has at least 30 incumbents in the EEO job category within a particular region in which a layoff will take place and there are at least 5 members of a specific affirmative action group who are targeted for layoff, the completed projected layoff report shall contain the following:

1) The Certification Sheet. The certification sheet confirms the accuracy of the layoff report. A completed certification sheet must indicate the name of the agency, agency Chief Executive Officer, agency EEO/AA Officer, and effective date of the projected layoff. The Chief Executive Officer and EEO/AA Officer must sign and date the certification sheet. The Department's assigned agency liaison will sign and date the certification sheet upon receipt.

2) The Projected Layoff Summary Form. The projected layoff summary form provides statistical data on the agency layoff by race, sex and disability. A completed form must indicate the agency name, the analysis date, and the date and source of workforce data. The form shall include: total employees before layoff and the total number of projected layoffs, by region; the number of persons laid off, by race, sex and disability; and, if necessary, adverse impact on any affirmative action group member.

3) The Projected Layoff Analysis Form. The projected layoff analysis form is used to calculate whether adverse impact exists for a specific affirmative action group subject to the layoff. A form must be completed for each affirmative action group member affected by the layoff, when necessary. A completed form must indicate the agency name, region and affirmative action group member. The form must indicate, by EEO job category, total employees and number of employees projected to be laid off. A comparison of the layoff rate of the affirmative action group in question with the layoff rate of the comparison group will indicate the impact ratio to determine adverse or no adverse impact.

4) The Narrative

A) The narrative must contain, but is not limited to, the following information:
DEPARTMENT OF HUMAN RIGHTS

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i) the State agency's reasons for selecting the targeted positions for layoff;

ii) any provisions of the Illinois Personnel Code, personnel rules, and/or collective bargaining agreement governing the layoff;

iii) if the layoff decisions were made by seniority date, an explanation of any exceptions and the reasons for the exceptions;

iv) any alternatives to laying off the affected employees that were available to and considered by the agency; and

v) a discussion of any significant impact the layoff would have on a specific affirmative action group.

B) If the report is being submitted less than 30 days prior to the effective date of the layoff, the narrative must set forth the emergency situation necessitating the layoff.

5) The agency's layoff plan shall identify, by region, job title, and affirmative action groups, the employees to be affected by the layoff.

6) A summary workforce analysis (Form CMS-DHR9) for the region where the layoff will occur.

b) When there are fewer than 30 incumbents in the EEO job category within a particular region in which a layoff will take place or there are fewer than 5 members of a specific affirmative action group who are targeted for layoff, the completed projected layoff report shall contain the following:

1) The Certification Sheet. The certification sheet confirms the accuracy of the layoff report. A completed certification sheet must indicate the name of the agency, agency Chief Executive Officer, agency EEO/AA Officer, and effective date of the projected layoff. The Chief Executive Officer and EEO/AA Officer must sign and date the certification sheet. The Department's assigned agency liaison will sign and date the certification sheet upon receipt.
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2) The Projected Layoff Summary Form. The projected layoff summary form provides statistical data of the agency layoff by race, sex and disability. A completed form must indicate the agency name, the analysis date, and the date and source of workforce data. The form shall include: total employees before layoff and the total number of projected layoffs, by region; the number of persons laid off by race, sex and disability; and, if necessary, adverse impact on any affirmative action group member.

3) The Narrative

A) The narrative must contain, but is not limited to, the following information:

i) the State agency's reasons for selecting the targeted positions for layoff;

ii) any provisions of the Illinois Personnel Code, personnel rules, and/or collective bargaining agreement governing the layoff;

iii) if the layoff decisions were made by seniority date, an explanation of any exceptions and the reasons they were made;

iv) any alternatives to laying off the affected employees that were available to and considered by the agency; and

v) a discussion of any significant impact the layoff would have on a specific affirmative action group.

B) If the report is being submitted less than 30 days prior to the effective date of the layoff, the narrative must set forth the emergency situation necessitating the layoff.

4) The agency's layoff plan shall identify, by region, job title, and affirmative action groups, the employees to be affected by the layoff.

5) A summary workforce analysis (Form CMS-DHR9) for the region where the layoff will occur.
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(Source: Added at 30 Ill. Reg. 1343, effective January 13, 2006)
## Illinois Counties by Region

### REGION 1
- Cook
- DuPage
- Grundy
- Kane
- Kendall
- Lake
- McHenry
- Will

### REGION 2
- Boone
- Carroll
- DeKalb
- Jo Daviess
- Lee
- Ogle
- Stephenson
- Whiteside
- Winnebago

### REGION 3
- Bureau
- Henderson
- Henry
- Knox
- Mercer
- Rock Island
- Stark
- Warren

### REGION 4
- Fulton
- Mason
- Peoria
- Tazewell
- Woodford

### REGION 5
- Kankakee
- LaSalle
- Livingston
- Marshall
- McLean
- Putnam

### REGION 6
- Champaign
- Douglas
- Ford
- Iroquois
- Vermilion

### REGION 7
- Christian
- DeWitt
- Logan
- Macon
- Macoupin
- Menard
- Montgomery
- Piatt
- Sangamon

### REGION 8
- Adams
- Brown
- Calhoun
- Cass
- Greene
- Hancock
- Jersey
- McDonough
- Morgan
- Pike
- Schuyler
- Scott

### REGION 9
- Bond
- Clinton
- Madison
- Monroe
- St. Clair
- Washington

### REGION 10
- Clark
- Clay
- Coles
- Crawford
- Cumberland
- Edgar
- Effingham
- Fayette
- Jasper
- Lawrence
- Marion
- Moultrie
- Richland
- Shelby
- Alexander
- Edwards
- Franklin
- Gallatin
- Hamilton
- Hardin
- Jackson
- Jefferson
- Johnson
- Massac

### REGION 11
- Perry
- Pope
- Pulaski
- Randolph
- Saline
- Union
- Wabash
- Wayne
- White
- Williamson
DEPARTMENT OF HUMAN RIGHTS

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(Source: Added at 30 Ill. Reg. 1343, effective January 13, 2006)
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NOTICE OF ADOPTED AMENDMENT

1) **Heading of the Part:** Housing Discrimination

2) **Code Citation:** 71 Ill. Adm. Code 2300

3) **Section Number:** Proposed Action: 2300.40 New Section

4) **Statutory Authority:** Implementing Articles 3, 6 and 7B, and authorized by Section 7-101(A) of the Illinois Human Rights Act [775 ILCS 5/Arts. 3, 6 and 7B and 7-101(A)]

5) **Effective Date of Amendment:** January 13, 2006

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:** September 9, 2005; 29 Ill. Reg. 13635

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

11) **Differences between proposal and final version:** Grammatical, punctuation or other nonsubstantive changes were made as agreed upon with JCAR.

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 amendments pending on this Part?** No

15) **Summary and Purpose of Amendment:** Pursuant to Section 7B-102(B) of the Illinois Human Rights Act [775 ILCS 5/7B-102(B)], a respondent’s failure to file a verified response within 30 days from receipt of a notice of a charge without good cause shall result in the issuance of a notice of default. Pursuant to Public Act 94-326 (effective July 26, 2005), this amendment defines good cause for failing to file a timely verified response. This amendment also enacts a procedure for a complainant to contest, and the Department to review, a respondent's untimely filed verified response.
16) Information and questions regarding this adopted amendment shall be directed to:

Brent A. Harzman
Staff Attorney
Illinois Department of Human Rights – Legal Division
100 W. Randolph St., Ste. 10-100
Chicago, IL 60601

(312) 814-1906 or (312) 263-1579 (TTY)

The full text of the Adopted Amendment begins on the next page:
DEPARTMENT OF HUMAN RIGHTS

NOTICE OF ADOPTED AMENDMENT

TITLE 71: PUBLIC BUILDINGS, FACILITIES, AND REAL PROPERTY
CHAPTER VII: DEPARTMENT OF HUMAN RIGHTS

PART 2300
HOUSING DISCRIMINATION

Section
2300.10 Definitions
2300.30 Exemptions
2300.35 Housing for Elderly Persons
2300.40 Verified Response to Charge
2300.50 Dismissal for Refusal to Accept Settlement Offer
2300.70 Procedures
2300.80 Rental of Rooms in a Private Home
2300.90 Real Estate Transactions

AUTHORITY: Implementing Articles 3, 6 and 7B, and authorized by Section 7-101(A), of the Illinois Human Rights Act [775 ILCS 5/Arts. 3, 6 and 7B and 7-101(A)].


Section 2300.40 Verified Response to Charge

a) Pursuant to Section 7B-102(B) of the Act, within 30 days after receipt of the notice of the charge, respondent shall file a verified response to the allegations in the charge. Respondent shall serve a copy of the verified response on complainant or complainant's representative and shall show proof to the Department that the copy was served on complainant or complainant's representative.

b) Where, without good cause shown, respondent's verified response is not timely filed and/or served on complainant or complainant's representative, complainant may raise that issue before the Department. The raising of an issue of an untimely filed and/or served verified response with the Department does not relieve complainant of complainant's duty to comply with the Department's investigation.
DEPARTMENT OF HUMAN RIGHTS

NOTICE OF ADOPTED AMENDMENT

c) Pursuant to Section 7B-102(B) of the Act, good cause for untimely filing a verified response may include, but shall not be limited to:

1) Death or sudden, serious illness of respondent or respondent's representative; or

2) Death or sudden, serious illness of an immediate family member of respondent or respondent's representative; or

3) Respondent filed and served a timely verified response, but the Department later determined that respondent's verified response was defective; or

4) Respondent acted with due diligence and was not deliberate or contumacious and did not unwarrantedly disregard the verified response process, as supported by affidavit or other evidence; or

5) Respondent's failure to timely file a verified response was due to circumstances beyond respondent's control, as supported by affidavit or other evidence.

d) Whether good cause exists is in the sole discretion of the Department.

e) Where respondent is responding to a notice to show cause for failing to timely file the verified response and/or timely serve a copy on complainant or complainant's representative, respondent shall include the verified response with the response to the notice to show cause and show proof that respondent has served the verified response on complainant or complainant's representative.

(Source: Added at 30 Ill. Reg. 1361, effective January 13, 2006)
DEPARTMENT OF PUBLIC HEALTH

NOTICE OF ADOPTED RULES

1) Heading of the Part: Americans with Disabilities Act Grievance Procedure

2) Code Citation: 4 Ill. Adm. Code 1700

3) Section Numbers: Adopted Action:
   1700.10   New Section
   1700.20   New Section
   1700.30   New Section
   1700.40   New Section
   1700.50   New Section
   1700.60   New Section
   1700.70   New Section

4) Statutory Authority: Americans With Disabilities Act of 1990 (42 USC 12101 et seq.) and Section 2 of the Department of Public Health Act [20 ILCS 2305/2]

5) Effective Date of Rulemaking: January 12, 2006

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: August 19, 2005; 29 Ill. Reg. 12831

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

11) Differences between proposal and final version: No changes were made in response to comments received during the first notice or public comment period. No changes were requested by JCAR.

12) Have all the changes agreed upon by the agency and JCAR been made as indicated in the agreements issued by JCAR? No changes were requested.

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

14) Are there any amendments pending on this Part? No
DEPARTMENT OF PUBLIC HEALTH

NOTICE OF ADOPTED RULES

15) **Summary and Purpose of Rulemaking:** The Department of Public Health is adopting these rules to implement 28 CFR 35.107, which requires all agencies of State government employing at least 50 persons to publish rules governing the grievance procedure under the Americans With Disabilities Act (ADA). Illinois State agencies are adopting similar rules based on a common model. The rules include procedures for filing a grievance; designation of a Coordinator for the agency, who will investigate grievances and make efforts to resolve them; and a final level of review for grievances not resolved at the Designated Coordinator Level. Grievances will be resolved on a case-by-case basis that does not establish a precedent on which other complainants should rely.

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

Susan Meister  
Division of Legal Services  
Department of Public Health  
535 West Jefferson, 5th Floor  
Springfield, Illinois 62761

    e-mail: rules@idph.state.il.us  
    217/524-5786

*The full text of the Adopted Rules begins on the next page:*
DEPARTMENT OF PUBLIC HEALTH

NOTICE OF ADOPTED RULES

TITLE 4: DISCRIMINATION PROCEDURES
CHAPTER LX: DEPARTMENT OF PUBLIC HEALTH

PART 1700

AMERICANS WITH DISABILITIES ACT GRIEVANCE PROCEDURE

Section 1700.10 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 Department of Public Health, when viewed in its entirety, be readily accessible to and usable by qualified individuals with disabilities.

c) It is the intention of the Department to foster open communication with all individuals requesting readily accessible programs, services and activities. The Department encourages supervisors of programs, services and activities to respond to requests for modifications before they become grievances.

Section 1700.20 Definitions
"Act" or "ADA" means the Americans With Disabilities Act of 1990 (42 USC 12101 et seq.).

"Complainant" is an individual with a disability who files a Grievance Form provided by the Department of Public Health under this procedure.

"Designated Coordinator" is the person appointed by the Department who is responsible for the coordination of efforts of the Department 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 535 West Jefferson Street, Springfield IL  62761. (See 28 CFR 35.107.)

"Director" means the Director of the Department of Public Health.

"Disabilities" shall have the same meaning as set forth in the Americans With Disabilities Act.

"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 Department of Public Health and believes he or she has been excluded from participation in, or denied the benefits of, any program, service or activity of the Department or has been subject to discrimination by the Department.

"Grievance Form" is prescribed for the purpose of filing a grievance under this Part and includes information such as name, address, phone number, 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 Department.

Section 1700.30  Procedure

a) Grievances must be submitted in accordance with procedures established in
DEPARTMENT OF PUBLIC HEALTH

NOTICE OF ADOPTED RULES

Sections 1700.40 and 1700.50 of this Part. 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/or the Final Levels described in Section 1700.50.

b) 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 from the Department of Public Health given in the grievance procedure.

c) The Department shall, upon being informed of individual's desire to file a formal grievance, instruct the individual how to receive a copy of this procedure and the Grievance Form.

Section 1700.40 Designated Coordinator Level

a) If an individual desires to file a 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.

b) Upon request, assistance in completing the Grievance Form shall be provided by the Department of Public Health.

c) 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 Director within 15 business days after receipt of the Grievance Form.

Section 1700.50 Final Level

a) If the grievance is not 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 Director for final review. The complainant shall submit these documents to the Director, together with a short written statement explaining the reasons for dissatisfaction with the
NOTICE OF ADOPTED RULES

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 Director shall appoint a three-member panel to review the grievance at the Final Level. One member 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) Complainant shall be afforded an opportunity to appear before the panel. Complainant shall have a right to appoint a representative to appear on his or 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 agreement of at least two of the panel members, but not later than 15 business days after the review described in subsection (b), the panel shall make recommendations in writing to the Director as to the proper resolution of the grievance. All recommendations shall include reasons for such recommendations and shall bear the signatures of the concurring panel members. A dissenting member of the panel may make a recommendation to the Director in writing and shall sign the recommendation.

e) Within 15 business days after receipt of recommendations from a panel, the Director or designee shall approve, disapprove or modify the panel recommendations; shall render a decision on those recommendations in writing; shall state the basis for his or decision; and shall cause a copy of the decision to be served on the parties. The Director's decision shall be final. If the Director disapproves or modifies the panel's recommendations, the Director may include written reasons for such disapproval or modification.

f) The Grievance Form, the Designated Coordinator's response, the statement of the reasons for dissatisfaction, the recommendations of the panel, and the decision of the Director shall be maintained in accordance with the State Records Act [5 ILCS 160] or as otherwise required by law.

Section 1700.60 Accessibility

The Department of Public Health shall ensure that all stages of the grievance procedure are readily accessible to and usable by individuals with disabilities.
DEPARTMENT OF PUBLIC HEALTH

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Section 1700.70  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 Department of Public Health. 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 RACING BOARD

NOTICE OF ADOPTED AMENDMENT

1) Heading of the Part: Totalizator Operations

2) Code Citation: 11 Ill. Adm. Code 433

3) Section Number: 433.120
   Adopted Action: Amended

4) Statutory Authority: 230 ILCS 5/9(b)

5) Effective Date of Rulemaking: February 1, 2006

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

7) Does this rulemaking contain incorporation by reference? No

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

9) Notice of Proposal Published in Illinois Register: 29 Ill. Reg. 13205; August 26, 2005

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 this rulemaking replace any emergency amendments currently in effect? No

14) Are there any other proposed amendments pending in this Part? No

15) Summary and purpose of Rulemaking: Currently, a wager of $500 or less at a manned terminal may be cancelled. This rulemaking extends to self-service terminals and permits the cancellation of a wager of $250 or less during afternoon host hours and $50 or less during evening host hours. However, with less than two minutes to post time during the evening host hours, 6:30 p.m. to 6:30 a.m., no cancellation of wagers shall be permitted at self-service terminals. In addition, the State Director of Mutuels shall have the authority to modify these parameters.

16) Information and questions regarding this adopted amendment shall be directed to:
ILLINOIS RACING BOARD

NOTICE OF ADOPTED AMENDMENT

Illinois Racing Board
100 West Randolph
Suite 7-701
Chicago IL 60601
Attn: Mickey Ezzo

(312) 814-5017
mickey_ezzo@irb.state.il.us

The full text of the Adopted Amendment begins on the next page:
ILLINOIS Registry

ILLINOIS RACING BOARD

NOTICE OF ADOPTED AMENDMENT

TITLE 11: ALCOHOL, HORSE RACING, AND LOTTERY
SUBTITLE B: HORSE RACING
CHAPTER I: ILLINOIS RACING BOARD
SUBCHAPTER b: RULES APPLICABLE TO ORGANIZATION LICENSEES

PART 433
TOTALIZER OPERATIONS

SUBPART A: DEFINITIONS AND GENERAL PROVISIONS

Section
433.10 Definitions
433.15 Purpose
433.20 Pari-Mutuel Audit Unit
433.25 Access to Totalizator and Pari-Mutuel Facility
433.30 Work Area for Pari-Mutuel Auditors
433.35 System Failure
433.45 Scientific Advancements
433.50 Filings
433.55 Standards

SUBPART B: PROCEDURES AND REPORTS REQUIRED OF ORGANIZATION LICENSEES

Section
433.60 Cashed Tickets
433.70 Summary of Pari-Mutuel Operations (Repealed)

SUBPART C: MUTUEL TICKETS

Section
433.100 Marking of Tickets
433.110 Status of Outs Account
433.120 Cancellation of Tickets
433.130 Records of Refunds and Cancellations
433.140 Computer Print-Outs
433.145 Additional Method of Calculation

SUBPART D: MUTUEL FACILITIES; TICKETS; SPECIFICATIONS
REQUIREMENTS AND PROCEDURES
ILLINOIS RACING BOARD

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Section
433.200 No Reduction in Capacity
433.210 Totalizators
433.220 Final Confirmation
433.230 Status Report
433.240 Locking Devices
433.250 Control of Locking Devices
433.260 Accounting for Individual Tickets
433.270 Tickets
433.280 Security for Tote Equipment
433.290 Access to Tote Room
433.295 Fax Machine
433.298 Hot-Line Telephone

SUBPART E: TOTALIZER SYSTEM: SYSTEM REQUIREMENTS

Section
433.300 General System Requirements
433.310 Redundant Capabilities
433.320 Redundant Hardware
433.330 Stop Betting Command
433.340 Record of Stop Betting Command
433.350 Odds Board Control
433.360 Odds Update
433.370 Retention of Racing Program Data
433.380 Control Access to Tote Computer Equipment
433.390 Software
433.400 Provide Summary
433.410 Unique Ticket Number
433.420 Uncashed Tickets
433.430 Computer Produced Reports
433.440 Magnetic Log Files
433.450 Security Sub-System
433.455 Access to Sub-Systems
433.458 Emergency Power Source
433.460 Power Fluctuations
433.470 Two Independent Sets of Pool Totals
433.480 Loss of Communications Reports
433.490 Cancellations
ILLINOIS RACING BOARD

NOTICE OF ADOPTED AMENDMENT

SUBPART F: TOTALIZATOR SYSTEM: PROCEDURAL REQUIREMENTS

Section
433.500 General Procedural Requirements
433.510 Pre-Program Tests
433.520 Totalizator Programs
433.530 Duplicate Copy of Totalizator Programs
433.540 Notice of Software Modifications
433.550 Testing of Software Modifications
433.560 Controlling System Utilities
433.570 Access to Tote Room
433.580 Control Log
433.600 Back-Up Procedures
433.610 Shut-Down Procedures

AUTHORITY: Authorized by Section 9(b) of the Illinois Horse Racing Act of 1975 [230 ILCS 5/9(b)].


SUBPART C: MUTUEL TICKETS

Section 433.120 Cancellation of Tickets

a) Cancellation at Terminals

1) Any wager at a manned terminal with a price of $500 or less may be cancelled, at the option of the holder, without question.

2) Any wager at an unmanned terminal with a price of $250 or less may be cancelled during afternoon host hours, at the option of the holder, without question. Any wager at an unmanned terminal with a price of $50 or less may be cancelled during evening host hours, at the option of the holder, without question (other than at or within the two minute period before post time).
b) Wagers with a price exceeding $500 may only be cancelled with approval of the Mutuel Manager of the organization licensee (e.g., race moved from turf to dirt, late jockey/driver change, late scratch of a horse).

c) In order to prevent practices detrimental to the public interest, the State Director of Mutuels may, at all terminals, increase or decrease the time period before post time within which wagers may not be cancelled and/or increase or decrease the price of wagers that may be cancelled. Any change in such time periods or wager prices shall be published in the program prior to the affected race.

(Source: Amended at 30 Ill. Reg. 1372, effective February 1, 2006)
DEPARTMENTOF CENTRAL MANAGEMENT SERVICES

NOTICE OF EMERGENCY AMENDMENT

1) **Heading of the Part:** Extensions of Jurisdiction

2) **Code Citation:** 80 Ill. Adm. Code 305

3) **Section Number:** Emergency Action: 305.250 New Section

4) **Statutory Authority:** Implementing and authorized by the Personnel Code [20 ILCS 415/4b].

5) **Effective Date of Amendment:** January 16, 2006

6) If this emergency amendment is to expire before the end of the 150-day period, please specify the date on which it is to expire: This rulemaking has no earlier expiration date specified.

7) **Date Filed with the Index Department:** January 13, 2006

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

9) **Reason for Emergency:** This change is a result of positions being included in the AFSCME bargaining unit and the agreement with AFSCME to include the positions under the Personnel Code. The emergency rulemaking will allow bargaining unit members the rights afforded to them in the collective bargaining agreement. If the employees are not provided their bargaining unit rights, the State of Illinois could be subject to unnecessary liability. This emergency rulemaking is necessary to ensure timely and proper implementation of the collective bargaining agreement. Although the Department was aware of the positions being petitioned for and subsequently certified under the AFSCME collective bargaining agreement, negotiations regarding placement were not complete on all titles until early January 2006. This office was attempting to limit the number of rulemakings and therefore, did not submit rulemaking earlier for some titles that had already been negotiated. While waiting for negotiations to be complete for all titles, the Department did not accurately anticipate the length of time these bargaining unit employees would be required to wait to be afforded all of their bargaining unit rights.

10) **A Complete Description of the Subjects and Issues Involved:** This change is a result of positions being included in the AFSCME bargaining unit and the agreement with AFSCME to include the positions under the Personnel Code.
DEPARTMENT OF CENTRAL MANAGEMENT SERVICES

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11) Are there any proposed amendment to this Part pending? No

12) Statement of Statewide Policy Objective: This rulemaking will not create a State mandate for units of local government.

13) Information and questions regarding this emergency rulemaking shall be directed to:

Gina Wilson
Illinois Department of Central Management Services
720 Stratton Office Building
Springfield, Illinois  62706

217/785-1793

The full text of the Emergency Amendment begins on the next page:
DEPARTMENT OF CENTRAL MANAGEMENT SERVICES

NOTICE OF EMERGENCY AMENDMENT

TITLE 80: PUBLIC OFFICIALS AND EMPLOYEES
SUBTITLE B: PERSONNEL RULES, PAY PLANS, AND POSITION CLASSIFICATIONS
CHAPTER I: DEPARTMENT OF CENTRAL MANAGEMENT SERVICES

PART 305
EXTENSIONS OF JURISDICTION

<table>
<thead>
<tr>
<th>Section</th>
<th>Description</th>
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</thead>
<tbody>
<tr>
<td>305.50</td>
<td>Extends Jurisdiction A, B &amp; C</td>
</tr>
<tr>
<td>305.60</td>
<td>Extends Jurisdiction A, B &amp; C (July 1, 1970)</td>
</tr>
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<td>305.70</td>
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<td>305.80</td>
<td>Extends Jurisdiction A, B &amp; C (August 1, 1970)</td>
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<td>Extends Jurisdiction A, B &amp; C (August 1, 1971)</td>
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<td>305.100</td>
<td>Extends Jurisdiction A, B &amp; C (November 16, 1971)</td>
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<tr>
<td>305.110</td>
<td>Extends Jurisdiction A, B &amp; C (April 1, 1972)</td>
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<td>305.120</td>
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<td>305.150</td>
<td>Extends Jurisdiction A, B and C (November 1, 1972)</td>
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<tr>
<td>305.160</td>
<td>Extends Jurisdiction B, Except 8b.1, 8b.3 and 8b.5 (January 1, 1973)</td>
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<td>305.170</td>
<td>Extension of Jurisdiction</td>
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<td>305.180</td>
<td>Termination of Extension of Jurisdiction</td>
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<td>305.190</td>
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<td>305.200</td>
<td>Third Extension of Jurisdiction to Office of the Treasurer</td>
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<tr>
<td>305.210</td>
<td>Extends Jurisdiction A, B and C (December 1, 1998)</td>
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<td>305.240</td>
<td>Extends Jurisdiction A, B and C (April 7, 2005)</td>
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EMERGENCY

AUTHORITY: Implementing and authorized by Section 4b of the Personnel Code [20 ILCS 415/4b].

SOURCE: Filed May 29, 1975; emergency amendment at 2 Ill. Reg. 46, p. 3, effective January 1, 1979, for a maximum of 150 days; amended at 3 Ill. Reg. 1, p. 61, effective January 1, 1979; codified at 7 Ill. Reg. 13214; amended at 10 Ill. Reg. 21643, effective December 15, 1986; amended at 22 Ill. Reg. 21302, effective December 1, 1998; emergency amendment at 26 Ill. Reg. 12060, effective July 16, 2002, for a maximum of 150 days; amended at 26 Ill. Reg. 16150,
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NOTICE OF EMERGENCY AMENDMENT

effective October 18, 2002; emergency amendment at 29 Ill. Reg. 5751, effective April 7, 2005, for a maximum of 150 days; emergency expired September 3, 2005; amended at 29 Ill. Reg. 14530, effective September 14, 2005; emergency amendment at 30 Ill. Reg. 1378, effective January 16, 2006, for a maximum of 150 days.

Section 305.250 Extends Jurisdiction A, B and C (January 16, 2006)


(Source: Added by emergency rulemaking at 30 Ill. Reg. 1378, effective January 16, 2006, for a maximum of 150 days)
DEPARTMENT OF CENTRAL MANAGEMENT SERVICES

NOTICE OF PEREMPTORY AMENDMENT

1) **Heading of the Part:** Pay Plan

2) **Code Citation:** 80 Ill. Adm. Code 310

3) **Section Number:** Peremptory Action:
   310.Appendix A Table W Amendment

4) **Reference to the Specific State or Federal Court Order, Federal Rule or Statute which Requires this Peremptory Rulemaking:** The Department of Central Management Services (CMS) is amending the Pay Plan (80 Ill. Adm. Code 310.Appendix A Table W) to reflect two Memoranda of Understanding between the Department of Central Management Services and the American Federation of State, County and Municipal Employees (AFSCME). One memorandum was signed on December 15, 2005 and the other on December 20, 2005. Both are effective October 6, 2005. Together, they assign the bargaining unit RC-062 pay grade 18 with regular (pay plan code B) and alternative (pay plan code Q) pension formula rates to the Staff Development Specialist I title, which continues to also be assigned the MC-05 range.

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:** January 13, 2006

7) **A Complete Description of the Subjects and Issues Involved:** CMS is amending the Pay Plan (80 Ill. Adm. Code 310) 310.Appendix A Table W RC-062 (Technical Employees, AFSCME) to reflect the assignment of the bargaining unit RC-062 pay grade 18 to the Staff Development Specialist I title, title code 41771.

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

9) **Date filed with the Index Department:** January 13, 2005

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?** Yes
NOTICE OF PEREMPTORY AMENDMENT

<table>
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<tr>
<th>Section Numbers</th>
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<td>310.50</td>
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<td>29 Ill. Reg. 14420, 9/30/05</td>
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<td>310.100</td>
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<tr>
<td>310.290</td>
<td>Amendment</td>
<td>29 Ill. Reg. 14420, 9/30/05</td>
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<td>310.490</td>
<td>Amendment</td>
<td>29 Ill. Reg. 14420, 9/30/05</td>
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<td>310.Appendix A Table AA</td>
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<td>29 Ill. Reg. 14420, 9/30/05</td>
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<td>310.Appendix D</td>
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<td>Amendment</td>
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<td>Amendment</td>
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<td>Amendment</td>
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<td>310.Appendix G</td>
<td>Amendment</td>
<td>30 Ill. Reg. 231, 1/13/06</td>
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</tbody>
</table>

13) **Statement of Statewide Policy Objective:** 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:**

   Mr. Jason Doggett  
   Acting Manager  
   Compensation Section  
   Division of Technical Services and Agency Training and Development
DEPARTMENT OF CENTRAL MANAGEMENT SERVICES

NOTICE OF PEREMPTORY AMENDMENT

Bureau of Personnel
Department of Central Management Services
504 William G. Stratton Building
Springfield IL  62706

(217) 782-7964
Fax: (217) 524-4570

The full text of the Peremptory Amendment begins on the next page:
DEPARTMENT OF CENTRAL MANAGEMENT SERVICES

NOTICE OF PEREMPTORY AMENDMENT

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 2006
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
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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 (Repealed)
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 2006
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 AMENDMENT

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)
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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 2006
310.APPENDIX C  Medical Administrator Rates for Fiscal Year 2006
310.APPENDIX D  Merit Compensation System Salary Schedule for Fiscal Year 2006
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 2006

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;
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Section 310. APPENDIX A  Negotiated Rates of Pay

Section 310. TABLE W  RC-062 (Technical Employees, AFSCME)

<table>
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<th>Title</th>
<th>Title Code</th>
<th>Unit</th>
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<td>RC-062</td>
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<td>RC-062</td>
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Bank Examiner III 04133 RC-062 22
Behavioral Analyst Associate 04355 RC-062 15
Behavioral Analyst I 04351 RC-062 17
Behavioral Analyst II 04352 RC-062 19
Business Administrative Specialist 05810 RC-062 16
Buyer 05900 RC-062 18
Capital Development Board Account Technician 06515 RC-062 11
Capital Development Board Art in Architecture Technician 06533 RC-062 12
Capital Development Board Construction Support Analyst 06520 RC-062 11
Capital Development Board Project Technician 06530 RC-062 12
Chemist I 06941 RC-062 16
Chemist II 06942 RC-062 19
Chemist III 06943 RC-062 21
Child Protection Advanced Specialist 07161 RC-062 19
Child Protection Associate Specialist 07162 RC-062 16
Child Protection Specialist 07163 RC-062 18
Child Welfare Associate Specialist 07216 RC-062 16
Child Welfare Staff Development Coordinator I 07201 RC-062 17
Child Welfare Staff Development Coordinator II 07202 RC-062 19
Child Welfare Staff Development Coordinator III 07203 RC-062 20
Child Welfare Staff Development Coordinator IV 07204 RC-062 22
Children and Family Service Intern – Option 1 07241 RC-062 12
Children and Family Service Intern – Option 2 07242 RC-062 15
Clinical Laboratory Technologist I 08220 RC-062 18
Clinical Laboratory Technologist II 08221 RC-062 19
Clinical Laboratory Technologist Trainee 08229 RC-062 14
Communications Systems Specialist 08860 RC-062 23
Community Management Specialist I 08891 RC-062 15
Community Management Specialist II 08892 RC-062 17
Community Management Specialist III 08893 RC-062 19
DEPARTMENT OF CENTRAL MANAGEMENT SERVICES

NOTICE OF PEREMPTORY AMENDMENT

<table>
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DEPARTMENT OF CENTRAL MANAGEMENT SERVICES

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Public Health Program Specialist III 36613  RC-062  19
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Public Information Officer III 37003  RC-062  19
Public Information Officer IV 37004  RC-062  21
Public Safety Inspector 37007  RC-062  16
Public Safety Inspector Trainee 37010  RC-062  10
Railroad Safety Specialist I 37601  RC-062  19
Railroad Safety Specialist II 37602  RC-062  21
Railroad Safety Specialist III 37603  RC-062  23
Railroad Safety Specialist IV 37604  RC-062  25
Real Estate Investigator 37730  RC-062  19
Real Estate Professions Examiner 37760  RC-062  22
Recreation Worker I 38001  RC-062  12
Recreation Worker II 38002  RC-062  14
Rehabilitation Counselor 38145  RC-062  17
Rehabilitation Counselor Senior 38158  RC-062  19
Rehabilitation Counselor Trainee 38159  RC-062  15
Rehabilitation Services Advisor I 38176  RC-062  20
Rehabilitation Workshop Supervisor I 38194  RC-062  12
Rehabilitation Workshop Supervisor II 38195  RC-062  14
Reimbursement Officer I 38199  RC-062  14
Reimbursement Officer II 38200  RC-062  16
Research Economist I 38207  RC-062  18
Research Scientist I 38231  RC-062  13
Research Scientist II 38232  RC-062  16
Research Scientist III 38233  RC-062  20
Resource Planner I 38281  RC-062  17
Resource Planner II 38282  RC-062  19
Resource Planner III 38283  RC-062  22
Revenue Auditor I (IL) 38371  RC-062  16
Revenue Auditor I (states other than IL, CA or NJ) 38371  RC-062  19
DEPARTMENT OF CENTRAL MANAGEMENT SERVICES

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State Police Field Specialist II  42002  RC-062  20
Statistical Research Specialist I  42741  RC-062  12
Statistical Research Specialist II  42742  RC-062  14
Statistical Research Specialist III  42743  RC-062  17
Storage Tank Safety Specialist  43005  RC-062  18
Telecommunications Specialist  45295  RC-062  15
Telecommunications Systems Analyst  45308  RC-062  17
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Unemployment Insurance Adjudicator I  47001  RC-062  11
Unemployment Insurance Adjudicator II  47002  RC-062  13
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Unemployment Insurance Revenue Specialist  47087  RC-062  13
Unemployment Insurance Special Agent  47096  RC-062  18
Veterans Educational Specialist I  47681  RC-062  15
Veterans Educational Specialist II  47682  RC-062  17
Veterans Educational Specialist III  47683  RC-062  21
Veterans Employment Representative I  47701  RC-062  14
Veterans Employment Representative II  47702  RC-062  16
Volunteer Services Coordinator I  48481  RC-062  13
Volunteer Services Coordinator II  48482  RC-062  16
Volunteer Services Coordinator III  48483  RC-062  18
Wage Claims Specialist  48770  RC-062  09
Weatherization Specialist I  49101  RC-062  14
Weatherization Specialist II  49102  RC-062  17
Weatherization Specialist III  49103  RC-062  20
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Effective July 1, 2005
Bargaining Unit:  RC-062

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DEPARTMENT OF CENTRAL MANAGEMENT SERVICES

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DEPARTMENT OF CENTRAL MANAGEMENT SERVICES

NOTICE OF PEREMPTORY AMENDMENT

Effective January 1, 2006
Bargaining Unit: RC-062

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DEPARTMENT OF CENTRAL MANAGEMENT SERVICES

NOTICE OF PEREMPTORY AMENDMENT

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DEPARTMENT OF CENTRAL MANAGEMENT SERVICES

NOTICE OF PEREMPTORY AMENDMENT

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(Source: Peremptory amendment at 30 Ill. Reg. 1382, effective January 13, 2006)
a) **Part(s) (Heading and Code Citation):** Rental Housing Support Program (47 Ill. Adm. Code 380)

1) **Rulemaking:**

   A) **Description:** The Rental Housing Support Program will provide rental assistance to extremely low income individuals and/or families throughout Illinois.

   B) **Statutory Authority:** Rental Housing Support Act [310 ILCS 105] and Illinois Housing Development Act [20 ILCS 3805/12].

   C) **Scheduled meeting/hearing dates:** None scheduled

   D) **Date agency anticipates First Notice:** January 31, 2006

   E) **Affect on small businesses, small municipalities or not for profit corporations:** None

   F) **Agency contact person for information:**

       Charlotte Flickinger

       Illinois Housing Development Authority

       401 N. Michigan Ave., Ste. 900

       Chicago, IL  60611

       312-836-5240

   G) **Related rulemakings and other pertinent information:** None
ILLINOIS REGISTER

PROPERTY TAX APPEAL BOARD

JANUARY 2006 REGULATORY AGENDA

a) **Part (Heading and Code Citation):** Practice and Procedure for Hearings Before the Property Tax Appeal Board, 86 Ill. Adm. Code 1910.

1) **Rulemaking**

   A) **Description:** The purpose of the proposed rulemaking is to revise and update various sections of Part 1910, Practice and Procedure for Hearings Before the Property Tax Appeal Board.

   B) **Statutory Authority:** 35 ILCS 200/Art.7 and 16-180 through 16-195

   C) **Scheduled meeting/hearing date:** Not yet determined.

   D) **Date agency anticipates First Notice:** February or March 2006.

   E) **Effect on small businesses, small municipalities or not for profit corporations:** None

   F) **Agency contact person for information:**

      Name: James W. Chipman
      Executive Director
      Address: Property Tax Appeal Board
      Rm. 402, Stratton Office Building
      401 S. Spring St.
      Springfield, Illinois 62706
      Telephone: (217) 782-6076

   G) **Related rulemaking and other pertinent information:** None
JOINT COMMITTEE ON ADMINISTRATIVE RULES
ILLINOIS GENERAL ASSEMBLY

SECOND NOTICES RECEIVED

The following second notices were received by the Joint Committee on Administrative Rules during the period of January 10, 2006 through January 17, 2006 and have been scheduled for review by the Committee at its February 14, 2006 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.

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JOINT COMMITTEE ON ADMINISTRATIVE RULES
ILLINOIS GENERAL ASSEMBLY
SECOND NOTICES RECEIVED

3/2/06  Department of Natural Resources, Sport Fishing Regulations for the Waters of Illinois (17 Ill. Adm. Code 810)  10/7/05  2/14/06  29 Ill. Reg. 14648

3/2/06  State Fire Marshal, Storage, Transportation, Sale, and Use of Liquefied Petroleum Gas (41 Ill. Adm. Code 200)  10/14/05  2/14/06  29 Ill. Reg. 15419
NOTICE OF WITHDRAWAL OF PROPOSED AMENDMENTS

1) **Heading of the Part:** Technology Advancement and Development Act Programs

2) **Code Citation:** 14 Ill. Adm. Code 545

3) **Section Numbers:**

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4) **Date Notice of Proposed Amendments Published in the Illinois Register:** 29 Ill. Reg. 14599; October 7, 2005

5) **Reason for the Withdrawal:** Section 2002 of the Act [20 ILCS 700/2002] references that the grant line may be used for activities generally consistent with the intent of Section 2002, such as providing investments, loans, or grants to individual businesses, partnerships or joint ventures that provide or commercialize products or services that meet homeland security or defense needs. Reference was made to grants; however, due to an oversight, reference was made only to loans and investments within one Section of the rulemaking previously filed.
OFFICE OF THE STATE FIRE MARSHAL

NOTICE OF WITHDRAWAL OF PROPOSED RULES

1) **Heading of the Part:** Illinois Elevator Safety Rules

2) **Code Citation:** 41 Ill. Adm. Code 220

3) **Section Numbers:** Proposed Action:
   - 1000.10 New Section
   - 1000.20 New Section
   - 1000.30 New Section
   - 1000.40 New Section
   - 1000.50 New Section
   - 1000.60 New Section
   - 1000.70 New Section
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   - 1000.130 New Section
   - 1000.140 New Section
   - 1000.150 New Section
   - 1000.160 New Section
   - 1000.170 New Section
   - 1000.180 New Section

4) **Date Notice of Proposed Rules Published in the Illinois Register:** January 21, 2005; 29 Ill. Reg. 1101

5) **Reason for the withdrawal:** The Joint Committee on Administrative Rules issued an Objection to, and a Filing Prohibition of, the proposed rulemaking at the June 14, 2005 meeting due to inconsistent provisions in relation to the Elevator Safety and Regulation Act. By this Notice, the Elevator Safety Review Board is withdrawing the rulemaking and will propose a new rulemaking that implements the new Public Act.
WHEREAS, approximately four million patients in the United States receive blood transfusions every year, and roughly 38,000 units of blood are required in hospitals and emergency treatment facilities on any given day; and

WHEREAS, unfortunately, blood donations often fall short of demand. While approximately eight million volunteers donate blood every year, just one trauma patient can use more than 100 units of blood, and donated blood has a shelf life of only 42 days; and

WHEREAS, even if volunteers donated blood regularly, donors can give only one unit of blood every eight weeks. Consequently, there is a continual need to recruit more donors; and

WHEREAS, January is commemorated as National Blood Donor Month to promote blood donations. Less than 5 percent of the eligible population actually donates blood, and community blood centers rely 100 percent on donations from volunteer donors in order to maintain a safe and viable blood supply:

THEREFORE, I, Rod Blagojevich, Governor of the State of Illinois, do hereby proclaim January 2006 as NATIONAL BLOOD DONOR MONTH in Illinois, and encourage all eligible donors to open their hearts this month by giving blood.

Issued by the Governor on January 9, 2006.
Filed with the Secretary of State January 11, 2006.

2006-6
DR. MARTIN LUTHER KING, JR. DAY

WHEREAS, at the time of his death in 1968, Dr. Martin Luther King, Jr. was a leading advocate for racial equality, social justice, and universal peace; and

WHEREAS, in the 11-year period between 1955 and 1968, Dr. King traveled more than six million miles and spoke on more than 2,500 occasions, appearing and speaking wherever there was injustice and civil unrest; and

WHEREAS, during that time, Dr. King helped lead a successful bus boycott in Montgomery, Alabama to end segregation on city buses and improve treatment of passengers. King also led a massive civil rights protest in Birmingham, Alabama that drew worldwide attention to the appalling treatment of African Americans in the South; and

WHEREAS, Dr. King is best known, however, for his I Have A Dream speech during the peaceful March on Washington demonstration for civil rights, in which he eloquently described a day when "all of God's children, black men and white men, Jews and Gentiles, Protestants and Catholics, will be able to join hands and sing in the words of the old Negro spiritual, 'Free at last! Free at last! Thank God Almighty, we are free at last'"; and

WHEREAS, it has been more than 35 years since Dr. King's death, but his words and teachings still resonate today. Consequently, the Illinois Department of Human Services Division of Community Health and Prevention is promoting an initiative in tribute to him on
PROCLAMATIONS

what would be his 77th birthday, for his commitment and dedication to public service and racial harmony; and

WHEREAS, the Division of Community Health and Prevention is encouraging leaders in every community to organize youth service projects on January 15 that will address local needs and promote unity:

THEREFORE, I, Rod R. Blagojevich, Governor of the State of Illinois, do hereby proclaim January 15, 2006 as DR. MARTIN LUTHER KING, JR. DAY in Illinois in honor and remembrance of Dr. King, whose dream of racial equality, social justice, and universal peace we embrace and strive to realize.

Issued by the Governor on January 10, 2006.
Filed with the Secretary of State January 10, 2006.

2006-7
VIPER MINE RESCUE CREW DAY

WHEREAS, we have all just witnessed a sad, sad tragedy. On the morning of Monday, January 2, a coal mine explosion trapped 13 miners 260 feet below ground in Sago Mine in Tallmansville, West Virginia; and

WHEREAS, in the immediate aftermath, International Coal Group dispatched a rescue team from Viper Mine in Williamsville, Illinois. The International Coal Group owns both mines in West Virginia and Illinois; and

WHEREAS, Viper Mine is about 10 miles north of Springfield, and employs approximately 250 men and women. Within two hours after they received the call, the Viper Mine’s seven-man rescue crew, a few of whom were on vacation, were on a plane en route to the disaster scene 630 miles away, and a second plane carried their gear; and

WHEREAS, the Viper team was among the first on the ground at the disaster site, and the only rescue crew from Illinois. As the situation unfolded, and rescue operations continued into Tuesday, the news became increasingly discouraging. Tests Tuesday morning showed the levels of carbon monoxide considerably higher than the level immediately dangerous to life and health. However, miners and their families in West Virginia and in central Illinois were holding out for a miracle; and

WHEREAS, Central Illinois miners were being briefed on the rescue effort at the beginning of each shift and keeping up with the news via televisions in the mine office’s common areas. Late Tuesday, rescue crews found one trapped miner dead, but they held out hope the others were still alive; and

WHEREAS, unfortunately, news circulated Wednesday morning that all but one of the trapped miners died. Our hearts go out to all their friends and families, and to the entire mining community; and

WHEREAS, although their rescue attempt did not save the trapped miners, their deaths do not diminish the audacious courage and bravery of the Viper team, who deserve our heartfelt thanks and admiration. Their names, which had been withheld during operations in deference to
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PROCLAMATIONS

their families, are Pete Bryant, Brett Bushong, Ty Hunt, Brad Kauffman, Paul Perrine, Brandon Sanson, and Alan Setzer:

THEREFORE, I Rod R. Blagojevich, Governor of the State of Illinois, do hereby proclaim January 12, 2006 as VIPER MINE RESCUE CREW DAY, and recognize and commend the Viper team for their selfless sacrifice and willingness to help fellow miners, the loss of whom we all grieve and to whose families I offer my most profound condolences and sympathies.

Issued by the Governor on January 12, 2006.
Filed with the Secretary of State January 12, 2006.

2006-8

CORN PRODUCTS INTERNATIONAL DAY

WHEREAS, with a central location in the heartland of America, Illinois has become one of the top producers of agricultural commodities; and
WHEREAS, Illinois' 76,000 farms cover 28 million acres, which is nearly 80 percent of the State's total land area. Corn is raised on 800,000 acres of that land, and Illinois is the second largest producer of corn in the nation; and
WHEREAS, Illinois also produces more ethanol, a corn-derived fuel alternative, than any other state in the nation; and
WHEREAS, in all, Illinois’ agricultural commodities generate more than $9 billion in revenue every year. Billions of additional dollars flow into the State's economy annually from ag-related industries such as farm machinery manufacturing, agricultural real estate, and the production and sale of value-added food products. Of those agricultural commodities, corn accounts for nearly 40 percent of the revenue; and
WHEREAS, Corn Products International, headquartered in Westchester, Illinois, is one of the world’s largest corn refiners and a major supplier of high-quality food ingredients and industrial products derived from the wet milling and processing of corn and other starch-based materials; and
WHEREAS, this year, Corn Products International will celebrate its 100th year of playing an integral role in Illinois corn production:

THEREFORE, I Rod R. Blagojevich, Governor of the State of Illinois, do hereby proclaim February 6, 2006 as CORN PRODUCTS INTERNATIONAL DAY in Illinois in recognition of Corn Products International and all those who keep our State in the forefront of corn production.

Issued by the Governor on January 12, 2006.
Filed with the Secretary of State January 12, 2006.

2006-9

NATIONAL TEEN DATING VIOLENCE AWARENESS AND PREVENTION WEEK

WHEREAS, a form of domestic violence, teen dating violence is generally an unspoken problem that is only now beginning to receive attention. One in three female high school
students report physical or sexual abuse by a dating partner, and more than 40 percent of male and female high school students have been victims of dating violence at least once; and

WHEREAS, those abused during adolescence are at a higher risk for substance abuse, eating disorders, risky sexual behavior, and suicide, and many will continue to be abused during their adult relationships; and

WHEREAS, unfortunately, 81 percent of parents either believe teen dating violence is not an issue or admit they do not know if it is an issue. Consequently, the American Bar Association has embarked on a national campaign to raise awareness about teen dating violence; and

WHEREAS, thanks to funding from the United States Department of Health and Human Services, the American Bar Association hosted a Teen Dating Violence Prevention National Summit in November of 2004. During the summit, state teams from across the country developed awareness and prevention toolkits for use by high schools during the 1st Annual National Teen Dating Violence Awareness and Prevention Week, which will be held from February 6-10; and

WHEREAS, children are extremely impressionable, and studies show that raising children today requires the help of an entire community. Remaining silent about teen dating violence sends a message that it is acceptable, but by working together we can prevent this deplorable behavior:

THEREFORE, I Rod R. Blagojevich, Governor of the State of Illinois, do hereby proclaim February 6-10, 2006 as NATIONAL TEEN DATING VIOLENCE AWARENESS AND PREVENTION WEEK in support of the American Bar Association’s wonderful campaign to bring attention to teen dating violence, which has been ignored for far too long, and to encourage all citizens to learn what they can do to prevent it.

Issued by the Governor on January 13, 2006.

Filed with the Secretary of State January 13, 2006.
ILLINOIS ADMINISTRATIVE CODE
Issue Index - With Effective Dates

Rules acted upon in Volume 30, Issue 4 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.

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(Processing fee for credit cards purchases, if applicable.) $1.50

**TOTAL AMOUNT OF ORDER** $__________

☐ Check  Make Checks Payable To:  **Secretary of State**

☐ VISA  ☐ Master Card  ☐ Discover  (There is a $1.50 processing fee for credit card purchases.)

Card #: ____________________________ Expiration Date: _______

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Administrative Code Division
111 E. Monroe
Springfield, IL  62756

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