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INTRODUCTION

The Illinois Register is the official state document for publishing public notice of rulemaking activity initiated by State governmental agencies. The table of contents is arranged categorically by rulemaking activity and alphabetically by agency within each category.

Rulemaking activity consists of proposed or adopted new rules; amendments to or repeaters of existing rules; and rules promulgated by emergency or peremptory action. Executive Orders and Proclamations issued by the Governor; notices of public information required by State Statute; and activities (meeting agendas; Statements of Objection or Recommendation, etc.) of the Joint Committee on Administrative Rules (JCAR), a legislative oversight committee which monitors the rulemaking activities of State Agencies; is also published in the Register.

The Register is a weekly update of the Illinois Administrative Code (a compilation of the rules adopted by State agencies). The most recent edition of the Code, along with the Register, comprise the most current accounting of State agencies’ rulemakings.

The Illinois Register is the property of the State of Illinois, granted by the authority of the Illinois Administrative Procedure Act [5 ILCS 100/1-1, et seq.].

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DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION

NOTICE OF PROPOSED RULES

1) **Heading of the Part**: Supplemental Reports for Accident and Health Insurers

2) **Code Citation**: 50 Ill. Adm. Code 937

3) **Section Numbers**

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4) **Statutory Authority**: Implementing and authorized by Sections 136 and 401 of the Illinois Insurance Code [215 ILCS 5/136 and 401]

5) **A Complete Description of the Subjects and Issues Involved**: This new Part establishes for all companies writing accident and health insurance a report requirement that is supplemental to the Annual Report requirement established by Section 136 of the Illinois Insurance Code. The supplemental report will require companies writing accident and health insurance to report more detailed information about premium earned, losses incurred, enrollment, premium discounts provided for participation in wellness programs, and average reimbursement rates paid to providers.

Information received pursuant to this Part will help the Division better evaluate health insurance costs and the overall health insurance marketplace.

DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION

NOTICE OF PROPOSED RULES


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

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

9) Does this rulemaking contain incorporations by reference? No

10) Are there any other proposed rulemakings pending on this Part? No

11) Statement of Statewide Policy Objective: This rulemaking will not require a local government to establish, expand or modify its activities in such a way as to necessitate additional expenditures from local revenues.

12) Time, Place and Manner in which interested persons may comment on this proposed rulemaking: Persons who wish to comment on this proposed rulemaking may submit written comments no later than 45 days after the publication of this Notice to:

James G. Jordan, Staff Attorney or Craig Cellini, Rules Coordinator
Department of Financial and Department of Financial and
Professional Regulation Professional Regulation
Division of Insurance 320 West Washington
DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION

NOTICE OF PROPOSED RULES

100 West Randolph St., Suite 9-301  3rd Floor
Chicago, Illinois 60601-3251
312/814-5410

Springfield, Illinois 62767-0001
217/785-0810

13) Initial Regulatory Flexibility Analysis:

A) Types of small businesses, small municipalities and not for profit corporations affected: This new rule will not affect small businesses, small municipalities or not-for-profit organizations.

B) Reporting, bookkeeping or other procedures required for compliance: Please review the requirements of this Part.

C) Types of professional skills necessary for compliance: Insurance/accounting

14) Regulatory Agenda on which this rulemaking was summarized: This rulemaking was not included on either of the 2 most recent regulatory agendas because: The need for this rulemaking was not anticipated at the time the Agenda was published.

The full text of the Proposed Rules are identical to the Emergency Rules published in this issue of the Illinois Register on page 10699.
DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION

NOTICE OF PROPOSED AMENDMENTS

1) **Heading of the Part:** Minimum Standards of Individual Accident and Health Insurance

2) **Code Citation:** 50 Ill. Adm. Code 2007

3) **Section Numbers:**
   - Proposed Action:
     - 2007.20 Amendment
     - 2007.65 New Section

4) **Statutory Authority:** Implementing Section 355a and authorized by Section 401 of the Illinois Insurance Code [215 ILCS 5/355a and 401]

5) **A Complete Description of the Subjects and Issues Involved:** The proposed changes will, subject to a three-year transition period for policies delivered or issued before July 1, 2008, establish rating restrictions for companies that provide individual health benefit plans in this state. The rating restrictions include: rating bands applied to individual blocks of business; limits on renewal rates applied to individual blocks of business; a requirement that companies disclose to consumers premium and cost-sharing related information, including information about establishment of premium rates, renewal of policies, and pre-existing conditions; and a requirement that companies file with the Director an actuarial certification certifying that the company complies with this Part.

6) **Any published studies or reports, along with the sources of underlying data, that were used when comprising this rulemaking, in accordance with 1 Ill. Adm. Code 100.355:**

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

8) **Does this rulemaking contain an automatic repeal date? No**
DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION

NOTICE OF PROPOSED AMENDMENTS

9) Does this rulemaking contain incorporations by reference? No

10) Are there any other proposed rulemakings pending on this Part? No

11) Statement of Statewide Policy Objectives: This rulemaking will not require a local government to establish, expand or modify its activities in such a way as to necessitate additional expenditures from local revenues.

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   Division of Insurance 320 West Washington
   100 West Randolph St., Suite 9-301 3rd Floor
   Chicago, Illinois 60601-3251 Springfield, Illinois 62767-0001

   312/814-5410 217/785-0813

13) Initial Regulatory Flexibility Analysis:

   A) Types of small businesses, small municipalities and not for profit corporations affected: These proposed amendments will not affect small businesses, small municipalities or not-for-profit organizations.

   B) Reporting, bookkeeping or other procedures required for compliance: Please review the amendments to this Part.

   C) Types of professional skills necessary for compliance: Insurance/accounting

14) Regulatory Agenda on which this rulemaking was summarized: This rulemaking was not included on either of the 2 most recent agendas because: The need for this rulemaking was not anticipated a the time the Agendas were published.

The full text of the Proposed Amendments begins on the next page:
DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION

NOTICE OF PROPOSED AMENDMENTS

TITLE 50: INSURANCE
CHAPTER I: DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION
SUBCHAPTER z: ACCIDENT AND HEALTH INSURANCE

PART 2007
MINIMUM STANDARDS OF INDIVIDUAL ACCIDENT AND HEALTH INSURANCE

Section 2007.10 Authority
2007.20 Purpose
2007.30 Applicability
2007.40 Revision of Noncomplying Policy Form and Subscriber Contracts Certificate of Compliance Required
2007.50 Definitions
2007.65 Rates
2007.70 Accident and Health Minimum Standards for Benefits
2007.90 Requirements for Replacement
2007.100 Severability

AUTHORITY: Implementing Section 355a and authorized by Section 401 of the Illinois Insurance Code [215 ILCS 5/355a and 401].


Section 2007.20 Purpose

The purpose of this Part is to define terms, establish minimum standards for benefits, prohibit certain policy provisions to prevent abusive rating practices; to require disclosure of rating practices to purchasers; to establish rules regarding the renewal of coverage; and to require disclosure provisions and replacement procedures in relation to policies of individual accident and health insurance.
DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION

NOTICE OF PROPOSED AMENDMENTS

(Source: Amended at 31 Ill. Reg. _____, effective ____________)

Section 2007.65  Rates

a) Definitions. For the purposes of Section 2007.65, the following terms have the following meanings.

1) Actuarial certification means a written statement by a member of the American Academy of Actuaries that an individual carrier is in compliance with this Section based upon the actuary's or individual's examination, including a review of the appropriate records and the actuarial assumptions and methods used by the carrier in establishing premium rates for applicable individual health benefit plans.

2) Block of business means all the individuals insured under the same individual health benefit plan.

3) Carrier means any entity that provides individual health benefit plans in this State. For purposes of this Part, carrier includes an insurance company, a group hospital or medical service corporation, a fraternal benefit society, a health maintenance organization, and any other entity providing an individual plan of health insurance or health benefits subject to State insurance regulation. Carrier does not include an organized delivery system.

4) Director means the Director of the Division of Insurance in the Department of Financial and Professional Regulation.

5) Filed rate means, for a rating period related to each block of business, the rate charged to all individuals with similar rating characteristics for individual health benefit plans.

6) Highest Actual Premium Rate means, for each block of business as to a rating period, the highest premium rate that was actually charged during the certification period under a rating system for that block of business by the carrier to an individual without dependents and to an individual with dependents.
NOTICE OF PROPOSED AMENDMENTS

7) Individual health benefit plan means any hospital or medical expense incurred policy or certificate, hospital or medical service plan, or health maintenance organization subscriber contract sold to an individual, or any discretionary group trust or association policy, whether issued within or outside of the State, providing hospital or medical expense incurred coverage to individuals residing within this State. Individual health benefit plan does not include a self-insured group health plan, a self-insured multiple employer group health plan, a group conversion plan, an insured group health plan, accident-only, specified disease, short-term hospital or medical, hospital confinement indemnity, credit, dental, vision, Medicare supplement, long-term care, or disability income insurance coverage, coverage issued as a supplement to liability insurance, workers' compensation or similar insurance, or automobile medical payment insurance.

8) Lowest Actual Premium Rate means, for each block of business as to a rating period, the lowest premium rate that was actually charged during the certification period under a rating system for that block of business by the carrier to an individual without dependents and to an individual with dependents.

9) Rating characteristics means demographic characteristics of individuals that are considered by the carrier in the determination of premium rates for the individuals and that are approved by the Director.

10) Rating period means the period for which premium rates established by a carrier are in effect.

11) Restricted network provision means a provision of an individual health benefit plan that conditions the payment of benefits, in whole or in part, on the use of health care providers that have entered into a contractual arrangement with the carrier or the organized delivery system to provide health care services to covered individuals.

b) Restrictions Relating to Premium Rates

1) Premium rates for any block of individual health benefit plan business issued on or after the effective date of this Section, by a carrier subject to
DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION

NOTICE OF PROPOSED AMENDMENTS

this Part, shall be limited to the composite effect of allocating costs among the following:

A) After making actuarial adjustments based upon benefit design and rating characteristics, the filed rate for any block of business shall not exceed the filed rate for any other block of business by more than 20%.

B) The filed rate for any block of business shall not exceed the filed rate for any other block of business by more than 30% due to factors relating to rating characteristics.

C) The filed rate for any block of business shall not exceed the filed rate for any other block of business by more than 30% due to any other factors approved by the Director.

D) Premium rates for individual health benefit plans shall comply with the requirements of this Section notwithstanding any assessments paid or payable by the carrier pursuant to any reinsurance program or risk adjustment mechanism.

E) An adjustment applied to a single block of business shall not be based on the claim experience or health status of an individual or that block of business.

F) For purposes of this subsection (b)(1), an individual health benefit plan that contains a restricted network provision shall not be considered similar coverage to an individual health benefit plan that does not contain such a provision, provided that the differential in payments made to network providers results in substantial differences in claim costs.

2) Notwithstanding subsection (b)(1), the Director may reduce or eliminate the allowed rating bands provided under subsections (b)(1)(A), (B) and (C), or otherwise limit or eliminate the use of experience rating.

3) A carrier shall not transfer an individual involuntarily into or out of a block of business.
NOTICE OF PROPOSED AMENDMENTS

4) The Director may suspend for a specified period the application of subsection (b)(1), as to the premium rates applicable to one or more blocks of business of a carrier for one or more rating periods, upon a filing by the carrier requesting the suspension and a finding by the Director that the suspension is reasonable in light of the financial condition of the carrier.

5) A carrier shall make a reasonable disclosure at the time of the offering for sale of any individual health benefit plan of all of the following:

A) The extent to which premium rates for a specified individual are established or adjusted based upon rating characteristics.

B) The carrier's right to change premium rates, and the factors, other than claim experience, that affect changes in premium rates.

C) The provisions relating to the renewal of policies and contracts.

D) Any provisions relating to any preexisting condition.

E) All plans offered by the carrier, the prices of such plans, and the availability of such plans to the individual.

6) A carrier shall maintain at its principal place of business a complete and detailed description of its rating practices, including information and documentation that demonstrate that its rating methods and practices are based upon commonly accepted actuarial assumptions and are in accordance with sound actuarial principles.

7) A carrier shall file with the Director annually, on or before March 15, an actuarial certification that the carrier is in compliance with this Section and that the rating methods of the carrier are actuarially sound. The certification shall be in a form and manner and shall contain information specified by the Director. A copy of the certification shall be retained by the carrier at its principal place of business.

8) For each block of business, the carrier shall, as part of its actuarial certification, file the Lowest Actual Premium Rate and the Highest Actual Premium Rate.
DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION

NOTICE OF PROPOSED AMENDMENTS

9) A carrier shall make the information and documentation maintained pursuant to subsection (b)(6) available to the Director upon request. The information and documentation shall be considered proprietary and trade secret information and shall not be subject to disclosure by the Director to persons outside of the Division except as agreed to by the carrier or as ordered by a court of competent jurisdiction.

c) Transition Period

In the case of individual health benefit plans delivered or issued for delivery prior to the effective date of this Section, a premium rate for a rating period may exceed the ranges set forth in subsections (b)(1)(A), (B) and (C) for a period of 3 years following the effective date of this Section. In such case, the percentage increase in the premium rate charged to an individual for a new rating period shall not exceed the sum of the following:

1) The percentage change in the new business premium rate measured from the first day of the prior rating period to the first day of the new rating period; in the case of a class of business into which the carrier is no longer enrolling individuals, the carrier shall use the percentage change in the base premium rate, provided that change does not exceed, on a percentage basis, the change in the new business premium rate for the most similar block of business into which the carrier is actively enrolling individuals; and

2) Any adjustment due to change in coverage or change in the case characteristics of the bloc as determined from the carrier’s rate manual for the class of business.

(Source: Added at 31 Ill. Reg. _____, effective ___________)

DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION

NOTICE OF PROPOSED AMENDMENTS

1) **Heading of the Part:** Small Employer Carrier Actuarial Certification and Documentation Requirement

2) **Code Citation:** 50 Ill. Adm. Code 5101

3) **Section Numbers:**

   - 5101.30  Amendment
   - 5101.60  Amendment
   - 5101.EXHIBIT A  Amendment

4) **Statutory Authority:** Implementing and authorized by Sections 30(b) and 40 of the Small Employer Health Insurance Rating Act [215 ILCS 93/30 and 40]

5) **A Complete Description of the Subjects and Issues Involved:** Companies subject to the Small Employer Health Insurance Rating Act ("Act") [215 ILCS 93] are already required, pursuant to Section 30 of the Act, to file with the Division an actuarial certification certifying that the company complies with the Act’s rating provisions. The proposed changes to this Part will require the report of additional data regarding compliance. More specifically, companies will now be required to report rate data for each class of business contained in the actuarial certification. For each class of business, the certification must provide the Lowest Actual Premium Rate and the Highest Actual Premium Rate.

6) **Any published studies or reports, along with the sources of underlying data, that were used when comprising this rulemaking, in accordance with 1 Ill. Adm. Code 100.355:**


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

8) **Does this rulemaking contain an automatic repeal date?** No
NOTICE OF PROPOSED AMENDMENTS

9) Does this rulemaking contain incorporations by reference? No

10) Are there any other proposed rulemakings pending on this Part? No

11) Statement of Statewide Policy Objectives: This rulemaking will not require a local government to establish, expand or modify its activities in such a way as to necessitate additional expenditures from local revenues.

12) Time, Place and Manner in which interested persons may comment on this proposed rulemaking: Persons who wish to comment on this proposed rulemaking may submit written comments no later than 45 days after the publication of this Notice to:

   James G. Jordan, Staff Attorney or Craig Cellini, Rules Coordinator
   Department of Financial and Professional Regulation
   Division of Insurance
   100 West Randolph St., Suite 9-301
   Chicago, Illinois 60601-3251
   312/814-5410

   or

   Craig Cellini, Rules Coordinator
   Department of Financial and Professional Regulation
   320 West Washington
   3rd Floor
   217/785-0813

13) Initial Regulatory Flexibility Analysis:

   A) Types of small businesses, small municipalities and not for profit corporations affected: These proposed amendments will not affect small businesses, small municipalities or not-for-profit organizations.

   B) Reporting, bookkeeping or other procedures required for compliance: Please review the amendments to this Part.

   C) Types of professional skills necessary for compliance: Insurance/accounting

14) Regulatory Agenda on which this rulemaking was summarized: This rulemaking was not included on either of the 2 most recent regulatory agendas because: The need for this rulemaking was not anticipated at the time the Agendas were published.

The full text of the Proposed Amendments begins on the next page:
DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION

NOTICE OF PROPOSED AMENDMENTS

TITLE 50: INSURANCE
CHAPTER I: DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION
SUBCHAPTER hhh: SMALL EMPLOYER HEALTH INSURANCE RATING ACT

PART 5101
SMALL EMPLOYER CARRIER ACTUARIAL CERTIFICATION AND DOCUMENTATION REQUIREMENTS

Section 5101.10 Purpose
5101.20 Applicability and Scope
5101.30 Definitions
5101.40 Pre-approval of an Individual Who is Not a Member of the American Academy of Actuaries for the purpose of filing an Actuarial Certification
5101.50 Small Employer Carrier Rating and Underwriting Record Maintenance
5101.60 Actuarial Certification and Format
5101.ILLUSTRATION A Actuarial Certification
5101.ILLUSTRATION B Statement of the Company Officer

AUTHORITY: Implementing and authorized by Sections 30(b) and 40 of the Small Employer Health Insurance Rating Act [215 ILCS 93/30(b) and 40].

SOURCE: Adopted at 24 Ill. Reg. 19162, effective December 19, 2000; amended at 31 Ill. Reg. _____, effective ______________.

Section 5101.30 Definitions

Act means the Small Employer Health Insurance Rating Act [215 ILCS 93].

Actuarial Certification means a written statement that the small employer carrier meets the applicable provisions of the Act and this Part by a member of the American Academy of Actuaries or other pre-approved individual acceptable to the Director.

Director means the Director of the Illinois Department of Financial and Professional Regulation-Division of Insurance.

Health Benefit Plan or Plan means any hospital or medical expense-incurred
policy, hospital or medical service plan contract, or health maintenance organization subscriber contract. Health benefit plan shall not include individual, accident-only, credit, dental, vision, Medicare supplement, hospital indemnity, long term care, specific disease, stop loss or disability income insurance, coverage issued as a supplement to liability insurance, workers' compensation or similar insurance, or automobile medical payment insurance.

**Highest Actual Premium Rate** means, for each class of business as to a rating period, the highest premium rate that was actually charged during the certification period under a rating system for that class of business by the small employer carrier to a small employer.

**Lowest Actual Premium Rate** means, for each class of business as to a rating period, the lowest premium rate that was actually charged during the certification period under a rating system for that class of business by the small employer carrier to the small employer.

Review of Appropriate Records means a review conducted in accordance with the Actuarial Standards Board document entitled Actuarial Standards of Practice No. 23 which addresses the Data Quality issue and gives guidance on what level of review would be required in a review of appropriate records.

Small Employer means, in connection with a group health plan with respect to a calendar year and a plan year, an employer who employed an average of at least 2 but not more than 50 employees on business days during the preceding calendar year and who employs at least 2 employees on the first day of the plan year.

Small Employer Carrier means a carrier that offers health benefit plans covering employees of one or more small employers in this State.

(Source: Amended at 31 Ill. Reg. ______, effective ____________)

**Section 5101.60 Actuarial Certification and Format**

An actuarial certification filing, an example of which is set forth in Illustration A of this Part, must contain the following information:

a) The full legal name of the small employer carrier for which the certification is being submitted;
b) The actuary's name, title and company affiliation, if applicable, or the individual's name, title and company affiliation that has been pre-approved pursuant to Section 5101.30 of this Part;

c) A statement as to whether the undersigned actuary is a member of the American Academy of Actuaries and meets the Qualification Standards appropriate for this certification. If not a member, the individual must indicate when he or she was pre-approved by the Director pursuant to Section 5101.30 of this Part and include a copy of the approval;

d) The period for which the certification is being made;

e) If appropriate, a statement indicating on whom the actuary relied for data. The actuary may rely on company personnel for data, but may not rely on another actuarial opinion. The nature and extent of reliance must be disclosed in the statement. The extent of reliance is subject to the Actuarial Standards of Practice No. 23 on Data Quality. A sample statement to be completed by the person on whom the actuary relied is shown in Illustration B of this Part;

f) The number of classes contained in the actuarial certification shall be the number in existence as of the end of the certification period. In the case of multiple classes, the certification must contain a list of the classes and a description of the substantial differences that support the establishment of each class. Refer to Section 20(a)(1), (2) and (3) of the Act [215 ILCS 93/20] for information concerning the allowable criteria that support the establishment of each class. This must include the criteria by which groups are assigned to each class;

g) Effective January 1, 2008, rate data shall be provided for each class of business contained in the actuarial certification. For each class of business, the certification must provide the Lowest Actual Premium Rate and the Highest Actual Premium Rate;

hg) The actuarial certification must contain a statement that the small employer carrier's rates either were or were not in compliance with Section 25 of the Act [215 ILCS 93/25];

jh) If the actuary determines that the small employer carrier's rates and rating factors in the rating manuals did not comply with statutory requirements under subsection
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(hg) of this Section, the certification must include a detailed description of the instances of noncompliance, steps taken to correct or detailed plans to correct the areas of noncompliance;

(ji) If the actuary determines that the small employer carrier's actual rates did not agree with the rates provided in the rating manuals, the certification must include a detailed description of the instances of noncompliance, steps taken to correct or detailed plans to correct the areas of noncompliance;

(kj) The annualized premium dollar amount for small employer groups in force at the end of the certification period and the annualized premium dollar amount for groups whose actual premium rates were tested to verify that the rates charged were in accordance with the rating manuals;

(lk) A certification that the actuary completed the work in compliance with Actuarial Standards of Practice 23, Data Quality, and 26, Compliance with Statutory and Regulatory Requirements for the Actuarial Certification of Small Employer Health Benefits (1100 Seventeenth Street, N.W., 7th Floor, Washington, D.C. 20006), and all applicable laws.

(ml) The actuarial certification required by this Part must be submitted to:

Illinois Division Department of Insurance
Life Actuarial Section
320 West Washington Street
Springfield, Illinois 62767-0001

(Source: Amended at 31 Ill. Reg. ______, effective ____________ )
Section 5101. ILLUSTRATION A  Actuarial Certification

The following illustrates an acceptable actuarial certification:

I, __________________________ (name) am an officer/employee of __________________________ (carrier name) OR am associated with the firm of __________________________ (employer name) and am a member of the American Academy of Actuaries and meet the Qualification Standards appropriate for this certification.

(or)

I, __________________________ (name) am an officer/employee of __________________________ (carrier name) OR am associated with the firm of __________________________ (employer name) and am not a member of the American Academy of Actuaries. I meet the definitional standards of the "Other Individual Acceptable to the Director" and have received the Director's prior approval on ______________ (date) pursuant to Section 5101.30 (50 Ill. Adm. Code 5001.30)

I am completing the small employer carrier actuarial certification for __________________________ (carrier name). I am familiar with the applicable statutory provisions of 215 ILCS 93/1 through 99 and requirements of 50 Ill. Adm. Code 5101 and the Company Bulletins issued by the Director of Insurance.

This certification is for the period from __________ through __________.

I relied on listings (summaries, rate manuals, etc.) of relevant data prepared by __________________________ (name and title of company officer responsible for preparing the underlying records). Attached is a (are) statement(s) by the indicated company officer(s) on whom I relied.

The Carrier had __________ separate class(es) of business at the end of the certification period. (If more than one, list the classes and the substantial differences which qualified each as a separate class. For each class, list the criteria by which groups are assigned to the class.)

The Lowest Actual Premium Rate and Highest Actual Premium Rate for Class 1 were respectively: _______________ and _______________.

If the carrier had in place more than one class of business at the end of the certification period, the Lowest Actual Premium Rate and Highest Actual Premium Rate for Class 2 were respectively: _______________ and _______________.

If the carrier had in place more than one class of business at the end of the certification period, the Lowest Actual Premium Rate and Highest Actual Premium Rate for Class 3 were respectively: __________ and __________.

If the carrier had in place more than one class of business at the end of the certification period, the Lowest Actual Premium Rate and Highest Actual Premium Rate for Class 4 were respectively: __________ and __________.

If the carrier received approval from the Director to establish more than 4 classes of business pursuant to Section 20 of the Act [215 ILCS 93/20], the actuarial certification shall include an attachment providing, in the manner and form described above, the Lowest Actual Premium Rate and Highest Actual Premium Rate for the additional class or classes of business.

The Carrier had small employer group annual premium volume of $_________ in force at the end of the certification period. I tested the rates of small employer groups whose annual premium volume totaled $_________ to verify that the rates actually charged were in accordance with the rating manual(s).

Based upon my review, I find that the small employer carrier __________ (was or was not) in compliance with Section 25 of the Small Employer Health Insurance Rating Act [215 ILCS 93/25]. (If not in compliance, include required additional paragraph, detail of instances of noncompliance and a description of the small employer carrier's plan to correct the areas of noncompliance.)

In other respects, my examination included a review of the actuarial methods in order to assure that the rating methods of the small employer carrier were actuarially sound.

Actuarial methods, considerations and analysis used in forming my opinion to conform the appropriate Actuarial Standards Board's Standards of Practice (ASOP), which form the basis of the statement of opinion.

Actuary name or the pre-approved individual's name (typewritten)

Signature
DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION

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Date

(Source: Amended at 31 Ill. Reg. ______, effective ____________)
DEPARTMENT OF HEALTHCARE AND FAMILY SERVICES

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

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

3) **Section Number:** Proposed Action:
   - 140.491 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:** The proposed amendment allows the Department to require prior approval for HFS funded non-emergency transportation services for residents of long-term care facilities. Further, changes the timeframe in which a provider may submit a request for post approval from 15 to 20 days.

6) **Published studies or reports, and sources of underlying data, used to compose this rulemaking:** None

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

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

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

10) **Are there any other proposed rulemakings pending on this Part?** Yes

   - **Sections:** Proposed Action: Illinois Register Citation:
     - 140.930 Amendment 31 Ill. Reg. 9731; July 13, 2007

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

12) **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:

    Tamara Tanzillo Hoffman
    Chief of Staff
DEPARTMENT OF HEALTHCARE AND FAMILY SERVICES

NOTICE OF PROPOSED AMENDMENT

Illinois Department of Healthcare and Family Services
201 South Grand Avenue E., 3rd Floor
Springfield IL  62763-0002

217/557-7157

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].

These proposed amendments may have an impact on small businesses, small municipalities, and not-for-profit corporations as defined in Sections 1-75, 1-80 and 1-85 of the Illinois Administrative Procedure Act [5 ILCS 100/1-75, 1-80, 1-85]. These entities may submit comments in writing to the Department at the above address in accordance with the regulatory flexibility provisions in Section 5-30 of the Illinois Administrative Procedure Act [5 ILCS 100/5-30]. These entities shall indicate their status as small businesses, small municipalities, or not-for-profit corporations as part of any written comments they submit to the Department.

13) Initial Regulatory Flexibility Analysis:

A) Types of small businesses, small municipalities and not-for-profit corporations affected: Non-emergency transportation providers

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

C) Types of professional skills necessary for compliance: None

14) Regulatory Agenda on which this Rulemaking was Summarized: July 2007

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

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

PART 140
MEDICAL PAYMENT

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SUBPART D: PAYMENT FOR NON-INSTITUTIONAL SERVICES

Section 140.491 Limitations on Medical Transportation

a) For payment to be made, the transportation service must be to the nearest available appropriate provider, by the least expensive mode that is adequate to meet the individual's need. When public transportation is available and is a practical form of transportation, payment will not be made for a more expensive mode of transportation.

b) Approval from the Department, or its authorized agent, is required prior to providing transportation to and from the source of medical care, except:

1) For transportation provided by an ambulance in emergency situations.

2) For individuals residing in a long-term care facility.

2)(3) For transportation provided by an ambulance for an individual who is transported from one hospital to a second hospital for services not available at the sending hospital.

3)(4) For transportation provided by a helicopter when it is demonstrated to be medically necessary as indicated by the written order of the responsible
physician in an emergency situation. An emergency may include, but is not limited to:

A) life threatening medical conditions;
B) severe burns requiring treatment in a burn center;
C) multiple trauma;
D) cardiogenic shock; and
E) high-risk neonates.

c) An on-going prior approval, with a duration of up to six months, may be obtained when subsequent trips to the same medical source are required. When prior approval is sought for subsequent trips to the same medical service, the client’s physician or other medical provider must supply the Department, or its authorized agent, with a brief written statement describing the nature of the medical need, the necessity for on-going visits, already established appointment dates and the number and expected duration of the required on-going visits.

d) The Department shall refuse to accept requests for non-emergency transportation authorizations, including prior approval and post-approval requests, and shall terminate prior approvals for future dates, for a specific non-emergency transportation vendor, if:

1) the Department has initiated a notice of termination of the vendor from participation in the Medical Assistance Program; or

2) the Department has issued a notification of its withholding of payments due to reliable evidence of fraud or willful misrepresentation pending investigation; or

3) the Department has issued notification of its withholding of payments based upon any of the following individuals having been indicted or otherwise charged under a law of the United States or Illinois or any other state with a felony offense that is based upon alleged fraud or willful misrepresentation on the part of the individual related to:
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A) the Medical Assistance Program;

B) a Medical Assistance Program provided in another state that is of the kind provided in Illinois;

C) the Medicare program under Title XVIII of the Social Security Act; or

D) the provision of health care services:
   i) if the vendor is a corporation, an officer of the corporation or an individual who owns, either directly or indirectly, five percent or more of the shares of stock or other evidence of ownership of the corporation; or
   ii) if the vendor is a sole proprietorship, the owner of the sole proprietorship; or
   iii) if the vendor is a partnership, a partner of the partnership; or
   iv) if the vendor is any other business entity authorized by law to transact business in the state, an officer of the entity or an individual who owns, either directly or indirectly, five percent or more of the evidences of ownership of the entity.

e) If it is not possible to obtain prior-approval for non-emergency transportation, post-approval must be requested from the Department or its authorized agent.

f) Post-approval may be requested for items or services provided during Department non-working hours or non-working hours of its agents, whichever is applicable, or when a life threatening condition exists and there is not time to call for approval.

g) To be eligible for post-approval consideration, the requirements for prior-approval must be met and post-approval requests must be received by the Department or its agents, whichever is applicable, no later than 2015 work days after the date services are provided. A request for payment submitted to a third party payor will not affect the submission time frames for any post-approval request. Exceptions
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to the aforementioned post-approval request time frames will be permitted only in the following circumstances:

1) The Department or the Department of Human Services has received the patient's Medical Assistance Application, but approval of the application has not been issued as of the date of service. In such a case, the post-approval request must be received no later than 90 days after the date of the Department's Notice of Decision approving the patient's application.

2) The patient did not inform the provider of his or her eligibility for Medical Assistance. In such a case, the post-approval request must be received no later than six months after the date of service, but will be considered for payment only if there is attached to the request a copy of the provider's dated private pay bill or collection response, which was addressed and mailed to the patient each month after the date of service.

(Source: Amended at 31 Ill. Reg. _______, effective ____________)
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1) **Heading of the Part:** Procedures and Standards

2) **Code Citation:** 92 Ill. Adm. Code 1001

3) **Section Number:** Proposed Action:
   - 1001.220 Amend

4) **Statutory Authority:** Subpart B implements Chapter 7 and is authorized by Sections 2-103, 2-104, 2-106, 2-107, 2-108, 2-113, and 2-114, and Ch. 7 of the Illinois Vehicle Code (625 ILCS 5/2-103, 2-104, 2-106, 2-107, 2-108, 2-113, 2-114 and Ch. 7)

5) **A Complete Description of the Subjects and Issues Involved:** This amendment achieves the following objectives: to codify recent relocations of hearing sites in safety responsibility hearings and to establish and codify procedures to inform the public of any future relocations.

6) Any published studies or reports, along with the sources of underlying data, that were used when composing this rulemaking: No

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

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

9) Does this rulemaking contain incorporations by reference? No

10) Are there any other proposed rulemakings pending on this Part? No

11) **Statement of Statewide Policy Objectives:** This amendment will not require a local government to establish, expand or modify its activities in such a way as to necessitate additional expenditures from local revenues.

12) **Time, Place, and Manner in which interested persons may comment on this proposed rulemaking:** Persons who wish to comment on these proposed amendments may submit written comments no later than 45 days after the publication of this Notice to:

   Marc Christopher Loro, Legal Advisor
   Department of Administrative Hearings
   200 Howlett Building
   Springfield, Illinois  62756
13) **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

14) **Regulatory Agenda on which this rulemaking was summarized:** May 24, 2007

15) **Does this amendment require the review of the Procurement Policy Board as specified in Section 5-25 of the Illinois Procurement Code?** No

The full text of the Proposed Amendment begins on the next page.
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TITLE 92: TRANSPORTATION
CHAPTER II: SECRETARY OF STATE

PART 1001
PROCEDURES AND STANDARDS

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1001.30  Right to Counsel
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1001.60  Substitution of Parties
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1001.80  Motions
1001.90  Form of Papers - Original Documents Required
1001.100 Conduct of Formal Hearings
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SUBPART C: RULES ON THE CONDUCT OF INFORMAL HEARINGS IN DRIVER'S LICENSE SUSPENSIONS AND REVOCATIONS
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Guidelines (Repealed)

AUTHORITY: Subpart A implements Sections 2-113, 2-118, 6-108, 6-205, and 6-206 and is authorized by Sections 2-103 and 2-104 of the Illinois Vehicle Code [625 ILCS 5/2-103, 2-104, 2-113, 2-118, 6-108, 6-205 and 6-206]. Subpart B implements Chapter 7 and is authorized by Sections 2-103, 2-104, 2-106, 2-107, 2-108, 2-113, and 2-114, and Ch. 7 of the Illinois Vehicle Code [625 ILCS 5/2-103, 2-104, 2-106, 2-107, 2-108, 2-113, 2-114 and Ch. 7]. Subpart C implements Sections 6-205(c) and 6-206(c)3 and is authorized by Sections 2-103 and 2-104 of the Illinois Vehicle Code [625 ILCS 5/2-103, 2-104, 6-205(c) and 6-206(c)3]. Subpart D is authorized by Sections 2-104 and 11-501 of the Illinois Vehicle Code and implementing Sections 6-103, 6-205(c), 6-206(c)3, and 6-208 of the Illinois Vehicle Code [625 ILCS 5/2-104, 6-103, 6-205(c), 6-206(c)3, 6-208 and 11-501]. Subpart E implements Sections 2-113, 2-118, 2-123, 6-103, 6-201, 6-906, and 6-908 and is authorized by Sections 2-103, 2-104, 6-906, and 6-909 of the Illinois Vehicle Code [625 ILCS 5/2-103, 2-104, 2-113, 2-118, 2-123, 6-103, 6-201, 6-906, 6-908 and 6-909]. Subpart F implements Sections 2-113, 2-118, 6-208.2, 11-501.1, and 11-501.8 and is authorized by Sections 2-103, 2-104, and 11-501.8 of the Illinois Vehicle Code [625 ILCS 5/2-103, 2-104, 2-113, 2-118, 6-208.2, 11-501.1 and 11-501.8]. Subpart G implements and is authorized by the Motor Vehicle Franchise Act [815 ILCS 710].

SUBPART B: ILLINOIS SAFETY RESPONSIBILITY HEARINGS

Section 1001.220  Hearings: Notice; Location; Procedures; Record

a) Notice of Suspension; Right to a Hearing. Subsequent to certification of an uninsured motorist by the Department of Transportation as provided by statute, and upon a preliminary finding that a reasonable possibility of a civil judgement exists, the Secretary shall institute a Notice of Suspension which advises the petitioner of his/her right to a hearing in lieu of deposit of security. Any petitioner, by submitting a written request postmarked within 15 days after the mailing date of the Notice of Suspension, will be afforded a full, fair, and impartial hearing to contest the preliminary finding of the Secretary. [625 ILCS 5/7-205] Any request for hearing will stay the effective date of the safety responsibility suspension pending the outcome of the hearing. Hearing requests received after the 15 day period will be granted; however, the suspension will not be stayed or removed pending the hearing.

b) Filing Fee

1) Effective 15 October 2001, a petition for a hearing to contest a suspension will not be accepted for filing unless it is accompanied by a fee of $50, as provided in Section 2-118 of the Illinois Vehicle Code. This filing fee must be submitted by each party who wishes to be made a petitioner in the proceeding, in the form of a money order, a cashier’s or certified check, a check drawn on the account of an attorney of record or an attorney professional corporation of record in a hearing before the Department of Administrative Hearings, or a credit card charge (with a pre-approved card), made payable to the Secretary of State.

2) This filing fee will not be refunded to any petitioner if the petitioner
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withdraws from the hearing or defaults.

3) In cases where a hearing is continued, any petitioner who has paid a filing fee will not be required to submit another filing fee.

4) In cases where a petitioner withdraws, the petitioner will be required to submit a filing fee before another hearing will be scheduled.

c) Decisionmaking Factors; Burden of Proof. The decision resulting from the hearing shall be based upon the following factors: whether the petitioner, as a motor vehicle owner or operator, has been involved, or whose vehicle has been involved, in a motor vehicle accident occurring within the State of Illinois and which has resulted in bodily injury or death of any person or in which damage to the property of any one person exceeds the amount provided by statute; whether petitioner is exempt from the Safety Responsibility Law; and whether there exists a reasonable possibility of a civil judgment against the petitioner. The petitioner shall bear the burden of proof throughout the proceedings. The standard of proof shall be a preponderance of the evidence.

d) Issuance of Notice of Hearing. The hearing shall be initiated by the issuance of a Notice of Hearing by the Secretary. The Notice shall be served upon the petitioner, as the person against whom action may be taken by the Secretary, any interested party, and any attorney of record.

e) Notice of Hearing - Content. The Notice of Hearing shall be a written statement setting forth, but not limited to, the following information:

1) The name of the petitioner;

2) The name and address of any interested party;

3) The date, time, place, and nature of the hearing;

4) The matters to be addressed at the hearing;

5) The name of the hearing officer;

6) The specific Sections of the Statutes involved;
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7) The statutory authority pursuant to which the hearing is being conducted;

8) Notice to the petitioner that a failure to appear will result in the denial of any relief requested and that at any rehearing granted under Section 1001.260 the petitioner will be deemed to have waived the right to subpoena or cross-examine witnesses that testified at the original hearing.

f) Location of Hearings; Notice of Change of Location. Hearings shall be conducted in the Counties of Cook, DeKalb, Will, Rock Island, Tazewell, Adams, Sangamon, Champaign, Coles, Kane, Marion, St. Clair, McDonough, and Jefferson and Jackson, and in such other locations as the Secretary shall from time to time designate. If the Secretary determines to abandon or change the location of hearings to a location or locations the hearing outside the counties specifically listed in this subsection, the Secretary shall publish a notice of the change, at least 20 days prior to the effective date of the change, in a local newspaper of general circulation in each county where a location is abandoned or to which a hearing location will be added or moved serving by the Secretary, 20 days prior notice of the change. The notice shall indicate the reasons for the determination and shall identify the new location proposed to serve the county, if known at the time of publication. The hearing site locations, and any change in those locations, shall also be posted on the Secretary of State website.

g) Parties to a Hearing; Disqualification of Hearing Officer. Every hearing shall be presided over by a hearing officer duly appointed by the Secretary. The Secretary may also appoint a representative to appear and participate in his behalf. Prior to the taking of evidence, a petitioner may request the disqualification of the hearing officer by making a motion for disqualification, stating the specific grounds upon which it is alleged that a fair and impartial hearing cannot be afforded the petitioner by the hearing officer. The hearing officer will rule upon the motion. If the motion is denied, the hearing will proceed. If the motion is granted, the case shall be transferred to another hearing officer for a same day hearing if possible. If not possible, a new hearing date will be established and another hearing officer shall be assigned by the Secretary. The hearing officer shall have authority to conduct the hearing, to rule on all motions, to administer oaths, to subpoena witnesses or documents at the request of any petitioner, to examine witnesses, and to rule upon the admissibility of testimony and evidence.

h) Petitioner's Rights. Each petitioner to the hearing and the Secretary of State shall have the following rights:
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1) The right to the issuance of subpoenas upon written request directed to the hearing officer at least 10 business days prior to the hearing;

2) The right to call and examine witnesses;

3) The right to cross-examine witnesses on any matter relevant to the issues, even though the matter was not covered on direct examination;

4) The right to introduce exhibits; and

5) The right to obtain in advance, upon written request, copies of all related police reports not designated confidential by State law. Requests must be submitted at least 10 business days prior to the hearing date to be considered. The petitioners may request copies of the related police reports at the hearing if the need for the copies could not be foreseen before the hearing, or the need for them arose because of the issues or allegations adduced at the hearing.

i) Right to Counsel; Attorneys Must Be Licensed; 711 Students. The petitioner shall have the right to appear in person and be heard through an attorney at law licensed to practice in the State of Illinois or any law student licensed under Supreme Court Rule 711. If the petitioner does not testify on his/her own behalf, he/she may be called by the representative of the Secretary and examined as if under cross-examination.

1) Attorneys admitted to practice in states other than the State of Illinois may appear by special leave of the hearing officer appointed to conduct the hearing, upon the attorney’s verbal representation or written documentation as to the attorney’s admittance.

2) A natural person may appear and be heard in his/her own behalf.

3) A corporation, association, or partnership may appear and present evidence by any bona fide officer, employee, or representative.

4) Only an attorney mentioned above properly licensed shall represent anyone else in any hearing in any matter involving the exercise of legal skill or knowledge. The standards of conduct shall be the same as before
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the Courts of the State of Illinois.

j) Recording of Proceedings; Obtaining a Copy of the Record.

1) The proceedings shall be recorded by a suitable electronic method. The petitioner may furnish, at his/her own expense, a certified shorthand reporter. All records taken shall be properly cataloged and preserved by the Secretary for a period of at least 45 days from the entry of the hearing officer's order. Oral proceedings, or any part thereof, shall be transcribed upon the request of the petitioner, any party, or his/her counsel at the requesting party's personal expense as specified in 2 Ill. Adm. Code 551.150, or the cost of an audio tape, plus mailing.

2) Persons who are not a party to a proceeding may obtain a copy of the file, a document in the file, or a transcript of the proceeding by filing with the Department a request for the record pursuant to, and subject to the restrictions and exemptions in, the Freedom of Information Act [5 ILCS 140].

k) Record of a Hearing. The record of a hearing held pursuant to this Section shall include, but not be limited to, the following:

1) The notices, pleadings, and responses to pleadings;

2) The motions and rulings on motions;

3) The matters officially noticed;

4) The offers of proof made and objections to and rulings on those offers;

5) The opinions, recommendations, or reports by the hearing officer, Secretary, or Department; and

6) A transcript of the proceedings.

l) Interpreters; Hearing Impaired. The Secretary will provide an interpreter for hearing impaired petitioners and interested parties who wish to testify. However, it is the responsibility of the petitioner or interested parties to provide a language interpreter.
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(Source: Amended at 31 Ill. Reg. ______, effective ____________)
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1) **Heading of the Part:** Issuance of Licenses

2) **Code Citation:** 92 Ill. Adm. Code 1030

3) **Section Numbers:** Proposed Action:
   - 1030.60 Amendment

4) **Statutory Authority:** 625 ILCS 5/6-108 and 625 ILCS 5/6-521

5) **A Complete Description of the Subjects and Issues Involved:** This amendment clarifies the testing and certifying requirements of the Third Party Certification Program Safety Officers.

6) **Published studies or reports, and sources of underlying data, used to compose this rulemaking:** None

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

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

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

10) **Are there any other proposed rulemakings pending on this Part?**

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<th>Section Numbers</th>
<th>Proposed Action</th>
<th>Illinois Register Citation</th>
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<td>1030.84</td>
<td>Amendment</td>
<td>31 Ill. Reg. 6030; April 20, 2007</td>
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<td>1030.Appendix B</td>
<td>Amendment</td>
<td>31 Ill. Reg. 9828; July 2, 2007</td>
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11) **Statement of Statewide Policy Objective:** The rulemaking will not create or enlarge a State mandate.

12) **Time, Place, and Manner in which interested persons may comment on this proposed rulemaking:** Texts of the prepared amendment is posted on the Secretary of State’s website, www.sos.il.us/departments/index/home as part of the *Illinois Register*. Interested persons may present their comments concerning this proposed rulemaking in writing within 45 days after publication of this Notice to:

    Arlene J. Pulley
    Office of the Secretary of State
13) **Initial Regulatory Flexibility Analysis:**

A) **Types of small businesses, small municipalities and not for profit corporations affected:** Those licensed as Third Party Certification Programs

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

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

14) **Regulatory Agenda on which this rulemaking was summarized:** July 2007

The full text of the Proposed Amendment begins on the next page:
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TITLE 92: TRANSPORTATION
CHAPTER II: SECRETARY OF STATE

PART 1030
ISSUANCE OF LICENSES

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Section 1030.60 Third-Party Certification Program

a) The Secretary of State shall adopt the following definitions for the terms listed as follows:

"Branch Facility" – a separate instructional facility operated and directly supervised by a third-party certifying entity at a location different from the principal location of the third-party certifying entity.

"Business Day" – any day on which the Office of the Secretary of State is open; Monday through Saturday, excluding State holidays.

"CDL Skills Test" – test given to an applicant who is attempting to obtain a Commercial Driver's License (CDL).

"Commercial Driver's License" or "(CDL)" – a driver's license issued by a state or other jurisdiction, in accordance with the standards contained in 49 CFR 383 (2003), to an individual that authorizes the individual to operate a certain class of a commercial motor vehicle, or vehicles. [625 ILCS 5/6-500(3)]

"Department" – Department of Driver Services within the Office of the Secretary of State.

"Driver Applicant" – an individual employed by a member of a third-party certifying entity, who participates in the third-party certification program.

"Fraud" – includes anything calculated to deceive, whether it be a single act or combination of circumstances, whether the suppression of truth or the suggestion of what is false, whether it be by direct falsehood or by innuendo, by speech or by silence.

"Motor Vehicle" – Every vehicle that is self-propelled and every vehicle that is propelled by electric power obtained from overhead trolley wires, but not operated upon rails, except for vehicles moved solely by human power and motorized wheelchairs, any properly registered vehicle meeting the description of the vehicle group of the class the driver applicant operates, or expects to operate.
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"Non-CDL Skills Test" – any drive test given to an applicant who is attempting to obtain a driver's license except for a D classification, a CDL or a CDL endorsement.

"Passenger Endorsement" – an indication on the driver's license that the driver has qualified to operate a vehicle designed to transport 16 or more persons, including the driver.

"Restriction" – requirement or condition added to a driver's license which must first be met by the license holder before he/she may legally operate a motor vehicle.

"Safety Officer" – any individual employed by a third-party certifying entity who is licensed for the purpose of conducting the skills test to determine for certification purposes that a driver applicant has been tested and meets the same qualifications required by the Secretary of State.

"Secretary of State" – Illinois Secretary of State.

"Third-Party Certification License" – a license issued by the Secretary of State to conduct a qualified third-party certification program, pursuant to Section 6-508 of the Illinois Driver Licensing Law of the Illinois Vehicle Code [625 ILCS 5/6-508].

"Third-Party Certification Program" – a program designed by the Secretary of State allowing third-party entities to provide to employees or by membership in a qualified training program of classroom and/or behind-the-wheel testing for the purpose of certifying to the Secretary of State that a driver applicant is qualified to operate a motor vehicle without the Secretary of State having to administer a road test pursuant to Section 6-508 of the Illinois Driver Licensing Law of the Illinois Vehicle Code [625 ILCS 5/6-508].

"Third-Party Certifying Entity" – any third-party entity licensed by the Secretary of State to engage in a third-party certification program.

"Training Vehicle" – a motor vehicle registered and insured by a licensed Commercial Driver Training School in accordance with Section 6-410 of the Illinois Vehicle Code [625 ILCS 5/6-410] and 92 Ill. Adm. Code
b) The Secretary of State shall not require an actual demonstration of the ability of
the driver applicant to operate and exercise ordinary and reasonable control of a
motor vehicle for purposes of third-party certification programs, if the third-party
certifying entity complies with the following requirements:

1) License Required – No person, firm, association, partnership or
corporation shall operate a third-party certification program, unless a
license has been issued by the Secretary of State.

2) Certify Only Employees or Members – A third-party certifying entity shall
certify only those driver applicants who are employed and on the payroll
of the entity at the time of certification. Third-party entities that are
unions or fire departments shall certify only those driver applicants who
are members at the time of certification.

3) A third-party certification entity shall not enter into any agreement with
employees/members they certify that provides for compensation,
reimbursement or any form of consideration, including but not limited to
monies, credits, services, or payroll withholding, payable to the third-party
entity, in exchange for training and/or testing from the employee/member
that is certified.

4) A third-party certification entity shall not accept compensation,
reimbursement or any form of consideration, including but not limited to
monies, credits, services, or payroll withholding in exchange for training
and/or testing from any employee/member that is certified.

c) Issuance and Renewal of Licenses

1) When an application is submitted for an original third-party certification
license, or safety officer license, the applicant or applicants shall not
conduct any business as a third-party certifying entity or safety officer
until a license is issued by the Secretary of State pursuant to the
requirements contained in subsections (d) and (i) of this Section.

2) When an application is made for the renewal of an existing third-party
certification license or a safety officer license, the applicant shall have the
authority to continue to conduct business as a third-party certifying entity or a safety officer until the renewal application is granted or denied by the Department, provided the application has been filed in a timely manner as provided in subsection (f)(4) of this Section. The application for the license shall be made in the same manner as an application for an original third-party certification license or safety officer license.

3) Licenses may not be assigned. No individual, partnership, association, or corporation may sell, assign, barter or trade a third-party certification license or safety officer license issued by the Secretary of State.

4) The Secretary may allow entities, otherwise ineligible to be licensed as a third-party certifying entity, to conduct a third-party certification program on a trial basis, not to exceed 1 year. At the close of the trial period, the Secretary will determine whether the entities participating in the pilot program shall be granted third-party certification entity status under this Section.

d) Requirements – Third-Party Certification Entities

1) The entity shall have at least 1 employee who is licensed or qualified to be licensed as a safety officer for the third-party certification program. A safety officer may only test and certify individuals in the class that is indicated on his or her safety officer license.

2) The entity shall have a regularly established place of business in the State of Illinois and operate or have access to appropriate vehicles, with the exception of employers having a regular place of business in a contiguous state, e.g., Indiana, Missouri, Wisconsin, Iowa and Kentucky. Any entity having its headquarters in a border state and wishing to participate in the third-party certification program, shall have an appointed agent, for purposes of this program, who is licensed as a safety officer and holds a valid Illinois driver’s license or a CDL issued by a contiguous state.

3) The entity shall submit to the Department a copy of any subcontract of services described in this Part.

4) The entity shall have a prescribed physical driving course for each location and be required to meet a driving skills test with the same
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minimum standards as the course used for examination by the Secretary of State (92 Ill. Adm. Code 1030.85).

5) The entity shall have access to a properly registered motor vehicle which meets the definition of the vehicle group of the classification that the driver applicant operates or expects to operate.

6) The entity shall provide the driver applicant, who takes and passes the skills tests, with documented proof (Secretary of State's driver test form) of the same, which shall evidence to the Department that the individual has successfully passed the skills tests administered by the third-party certifying entity.

7) The entity shall collectively submit completed application forms to the Department for each main office, branch office and safety officer.

8) The entity shall have and use a business telephone listing for all business purposes.

9) If a licensed safety officer is temporarily suspended, laid-off or discharged by a third-party certifying entity, the entity shall immediately notify the Secretary of State, on forms furnished by the Secretary of State, of the name, address and license number of the safety officer, such officer's termination date and reason for termination. In all cases where a safety officer has ceased working for the third-party certifying entity, the safety officer must surrender his/her license to the Secretary of State.

10) Facility
   A) The established place of business of each third-party certifying entity must consist of at least the following permanent facilities:
      i) an office facility;
      ii) appropriate space (an area at least 15 feet wide by 100 feet long) to conduct all basic control skills tests (92 Ill. Adm. Code 1030.85).
   B) A third-party certifying entity which has an established place of
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business may operate a branch facility provided the branch facility meets all requirements of the main facility pursuant to subsections (d)(10)(A) and (d)(10)(D) of this Section.

C) Upon receipt by the Secretary of State of a written request to open a branch facility, an authorized representative of the Secretary of State shall inspect the branch facility and, if it complies with the provisions of this Section, shall issue the appropriate license which must be displayed in a visibly prominent place in the branch facility.

D) Location must comply with public health and safety standards contained in the Public Building Egress Act [415 ILCS 55], the Natural Gas Odor Injection Act [430 ILCS 25], and the Environmental Barriers Act [410 ILCS 25].

11) Records – All third-party certifying entities licensed by the Secretary of State must maintain a record showing the name and address of each driver certified by the entity, the instruction permit or driver’s license number of every driver certified, and the results of the final skills test, including endorsements, given to each driver applicant, the name of the safety officer who administered the skills test and the license plate number of the vehicle used to conduct the test.

A) All records must be maintained for a period of 4 years.

B) Proof of eligibility for certification and final skills tests results for each driver applicant must be kept at the location where the road test was given.

C) Maintain proof of training course completion for each individual CDL certified who does not hold a valid CDL at the time of testing on the form provided by the Secretary of State, or an equivalent form approved by the Secretary of State.

12) Auditing – CDL Driving Skills Test

A) All third-party certifying entities must allow the Secretary of State and Federal Highway Administration or its representatives to
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conduct random examinations, inspections and audits without prior notice pursuant to 49 CFR 385.85, including audits of employment records of individuals certified by the third-party certification entity and any and all agreements or contracts governing the employer/employee relationship as it pertains to training or testing.

B) All third-party certifying entities must allow the Secretary of State to conduct on-site inspections at least annually.

C) The Secretary of State or his designee shall annually re-examine a sample percentage of the certified driver applicants to compare pass/fail results and determine the percentage of certified driver applicants employed by the third-party certifying entity.

i) If the results of the random examination reflect a failure rate greater than the current Secretary of State's acceptable failure rate of 20 percent, the third-party entity will be notified in writing of the need to retrain the failed applicants.

ii) The retraining must be completed within 30 days, at which time the trainee must be referred to the Secretary of State to be skills tested.

iii) The Commercial Driver Training School section will determine the location and time of the Secretary of State retests.

D) The Secretary of State may re-examine any individual who was tested and certified by a third-party certification entity.

13) Display of Licenses – Each third-party certifying entity shall display in a prominent place at the established place of business the following:

A) The State license issued to the third-party certifying entity; and

B) Safety officer licenses of all safety officers employed by the third-party certifying entity.
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14) Provide a minimum 2 week training course to each individual who is CDL certified pursuant to the recommendations of the Highway Safety 2000 Advisory Task Force and who does not hold a valid CDL at the time of testing that meets the requirements of 49 CFR 383.110-121 (1995) (49 USC 3102; 49 USC App. 12701; 49 CFR 1.49).

15) The third-party certification entity must provide the Secretary of State with the names of all individuals that were tested and certified from a non-CDL classification to a CDL classification by the entity whose employment/membership has been terminated up to 6 months after the date of certification.

A) The Secretary of State will cite these individuals to be retested in a representative vehicle in order for the individual to maintain the license classification in which they were originally certified.

B) The Secretary of State will provide each entity with a Verification of Continual Employment form to assist the third-party certification entity in determining the names of the individuals who have terminated their employment/membership up to 6 months after being certified.

16) The entity may not have a current unsatisfactory rating from the U.S. Department of Transportation (see 49 CFR 385.3).

e) Skills Tests

1) Any CDL or School Bus skills tests administered by the third-party certifying entity must be conducted by a licensed safety officer as specified in Subparts G and H of 49 CFR 383.

2) Driving Skills – The entity shall have a prescribed physical driving course for each location and must be required to administer a skills test with the same minimum standards as that which would be used by the Secretary of State (see 92 Ill. Adm. Code 1030.85).

3) Pre-Trip Inspection Skills – Where applicable, the entity shall test and the driver applicant shall demonstrate skills necessary to conduct a pre-trip inspection, which include the ability to:
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A) locate and verbally identify air brake operating controls and monitoring devices;

B) determine the motor vehicle's brake system condition for proper adjustments and that the air system connections between vehicles have been properly made and secured;

C) inspect low pressure warning devices to ensure they will activate in emergency situations;

D) ascertain, with the engine running, that the system contains an adequate supply of compressed air;

E) determine that the required minimum air pressure build up at the time is within acceptable limits and that required alarms and emergency devices automatically deactivate at the proper pressure level; and

F) operationally check the brake system for proper performance.

4) Restrictions and/or Endorsements – Third-party certification entities conducting road tests for restrictions and/or passenger endorsements must meet a skills test with the same minimum standards as an exam offered by the Secretary of State for the restriction and/or endorsement (see 92 Ill. Adm. Code 1030.92).

5) Third-party certifying entities conducting road tests for motorcycle and non-CDL classifications are not bound by subsections (e)(1) through (4), but instead must meet a driving skills test prescribed by the Secretary of State for these classifications, judged by the same minimum standards, and conducted by a licensed safety officer (92 Ill. Adm. Code 1030.85).

A) Motorcycle skills tests must include at least the following:

i) basic vehicle control skills;

ii) safe driving skills;
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iii) visual search;

iv) speed and space management; and

v) mounting and dismounting.

B) Non-CDL skills tests must include at least the following:

i) basic vehicle operation;

ii) safe driving skills;

iii) speed and attention;

iv) lane and right of way observance;

v) obeying traffic control devices;

vi) use of special equipment.

6) Require Instruction Permit – Before a driver applicant may be skills tested and certified by a third-party entity, the driver applicant must obtain an instruction permit from the Secretary of State for the specific vehicle classification in which he/she intends to be licensed. The driver applicant must hold a valid instruction permit for a period of at least 2 weeks prior to being skills tested and certified by a third-party entity, if not currently licensed in the classification representative of the vehicle the applicant intends to drive.

f) Issuance and Renewal of Third-Party Certifying Entity Licenses

1) Issuance of Licenses to Third-Party Certifying Entity – The Secretary of State shall issue a license to conduct a third-party certification program when the Secretary of State is satisfied that the entity applying for a third-party certification license has met the requirements under this Section.

2) All licenses issued to any third-party certifying entity shall remain valid indefinitely unless canceled, suspended or revoked. The Secretary of State shall send affidavits to, and conduct audits of, each licensee annually in
order to determine that the licensee remains in compliance with the requirements of this Section.

g) Denial, Cancellation, Suspension, and Revocation of Third-Party Certifying Entity Licenses

1) The Secretary of State shall deny an application for a third-party certifying entity license or renewal:

A) to any entity that submits a fraudulent application.

B) to any entity that currently employs individuals also employed by the Secretary of State.

C) to any entity that owes outstanding fees to the Secretary of State.

D) to any third-party certifying entity that lacks a safety officer.

E) to any third-party certifying entity that fails to meet location standards:

   i) fails to comply with public health and safety standards contained in the Public Building Egress Act [45 ILCS 55], the Natural Gas Odor Injection Act [430 ILCS 25], and the Environmental Barriers Act [410 ILCS 25].

   ii) fails to have a telephone that is registered to the third-party certification entity.

F) to any third-party certifying entity with a current unsatisfactory rating from the U.S. Department of Transportation.

G) to any commercial driver training school.

H) to any third-party certification entity that enters into any agreement with employees/members they certify that provides for compensation or any form of consideration, including but not limited to monies, credits, services, or payroll withholding in exchange for training and/or testing from the employee/member
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that is certified.

I) to any third-party certification entity that accepts compensation or any form of consideration, including but not limited to monies, credits, services, or payroll withholding in exchange for training and/or testing from any employee/member that is certified.

2) The Secretary of State shall cancel a third-party certifying entity license for failing to correct, after being served written notice giving 5 business days to correct, any violation of the following regulations and laws governing third-party entities:

A) the entity employs individuals also employed by the Secretary of State.

B) the entity owes outstanding fees to the Secretary of State.

C) the third-party certifying entity lacks a safety officer.

D) the third-party certifying entity fails to meet location standards:
   i) fails to comply with public health and safety standards contained in the Public Building Egress Act [45 ILCS 55], the Natural Gas Odor Injection Act [430 ILCS 25], and the Environmental Barriers Act [410 ILCS 25].
   ii) fails to have a telephone that registers to the third-party certification entity.

E) the entity currently has an unsatisfactory rating from the U.S. Department of Transportation.

F) the entity is a commercial driver training school.

3) The Secretary of State shall suspend a third-party certifying entity’s license 3 months, depending upon the severity of the infraction, upon evidence of the following:

A) improper recordkeeping in violation of subsection (d)(11) of this
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B) failure by the entity's certified driver applicants to pass skills tests upon re-examination, pursuant to subsections (c) and (d)(12) of this Section.

C) any violation of this Part.

D) failure to provide the required training to individuals that were CDL certified and did not hold a valid CDL at the time of testing.

E) failure to notify the Secretary of State with names of individuals that were certified from a non-CDL classification to a CDL classification and whose employment/membership was terminated up to 6 months after the date of certification.

4) The Secretary of State shall suspend a third-party certifying entity's license up to 6 months, depending upon the severity of the infraction, upon evidence of the failure to produce records upon demand of the auditing agency.

5) The Secretary of State shall suspend a third-party certifying entity's license up to 1 year, depending upon the severity of the infraction, if it is discovered the entity is certifying applicants who have not obtained instruction permits and/or have not maintained such instruction permits for at least 2 weeks prior to testing and certification.

6) The Secretary of State shall revoke the third-party certifying entity's license upon evidence of the following:

A) the entity submitted a fraudulent application.

B) if the entity engages in or permits any type of fraudulent activity, either with reference to any certified individual or the Secretary of State.

C) the third-party certification entity enters into an agreement with employees/members they certify that provides for compensation or any form of consideration, including but not limited to monies,
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credits, services, or payroll withholding in exchange for training and/or testing from the employee/member that is certified.

D) the third-party certification entity accepts compensation or any form of consideration, including but not limited to monies, credits, services, or payroll withholding in exchange for training and/or testing from any employee/member that is certified.

h) Issuance and Renewal of Safety Officer License

1) Issuance of Licenses to Safety Officers – The Secretary of State shall issue a license to each safety officer when the Secretary of State is satisfied that such person has met the qualifications required under this Section. Each third-party certification safety officer license shall authorize the licensee to test for only the employer indicated on the license, except when the safety officer is employed by an entity providing contractual services to the third-party certification entity.

2) An individual may be issued 2 safety officer licenses in the following combinations:

A) as a safety officer for 2 governmental agencies, or

B) as a safety officer for a private entity and a governmental agency.

3) All licenses issued to any safety officer shall remain valid indefinitely unless canceled, suspended or revoked.

i) Safety Officer

1) Requirements. The Secretary of State shall not issue a safety officer license:

A) unless the safety officer applicant is 21 years of age.

B) if the applicant fails to properly make application for such license.

C) if the applicant submits a fraudulent application.
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D) if the applicant owes outstanding fees to the Secretary of State.

E) if the applicant's driver's license is currently canceled, suspended or revoked.

F) unless the safety officer applicant is employed by a third-party certifying entity.

G) unless the safety officer applicant has, for at least 2 years immediately preceding application, a valid driver's license in the specific classification in which he/she intends to test and, if intending to skills test school bus permit applicants, a current, valid school bus driver permit.

H) to any person intending to skills test CDL driver applicants or school bus permit applicants who:

i) has not completed the third party CDL training session administered by the Secretary of State, Driver Services Department's Commercial Driver Training section. The written test will consist of 30 questions pertaining to Secretary of State Examiners Guide for CDL and will be offered by the department at periodic intervals. In order to pass the written test an individual shall answer at least 24 questions correctly. The third party school bus program will have an additional 10 questions and the individual must answer 8 questions correctly in order to pass.

ii) has not passed a CDL skills examination in the classification and/or endorsements in which they intend to skills test. The department will offer this examination at periodic intervals. Each applicant will be given a maximum of 3 opportunities in a twelve month period to pass the commercial driver's license safety officer examination. An applicant for a commercial driver's license safety officer may be allowed to attempt the road test a second time in the same day during normal business hours of the Driver Services facility if he/she fails the first attempt to pass the road test. However, if the applicant
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demonstrates a danger to the public safety during his/her first attempt to pass a road test, he/she will not be allowed to make a second or subsequent attempt during the same day. An applicant will not be allowed to make a third attempt to pass a road test on the same day in which he/she failed the previous attempt. Individuals who have failed their third examination must wait at least 1 year from the date of the third failure before making a new application.

I) to any person whose driver's license has been suspended or revoked, within a period of 5 years after the date of application.

J) to any person who fails to properly make application for such safety officer's license or otherwise indicates that he/she is unqualified to receive such a license.

K) to any person who is currently a salaried employee of the Secretary of State.

L) to the applicant who does not meet the requirements provided in subsection (i)(1)(H) of this Section.

M) to the applicant who does not hold a valid Illinois driver's license or a driver's license from a contiguous state in the classification and/or endorsement in which he/she intends to skills test.

N) to any applicant who has been convicted of driving while under the influence of alcohol, other drugs, or a combination thereof.

O) to any individual who has failed to comply with the provisions of this Part.

P) to any person who is an owner or an instructor of a commercial driver training school.

2) Denial of License. The Secretary of State shall deny a safety officer's license upon evidence that:

A) the applicant has been convicted of driving while under the
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influence of alcohol, other drugs, or a combination thereof; leaving
the scene of an accident; or reckless homicide or reckless driving,
or is suspended under Section 6-206(a)(3) of the Illinois Driver
Licensing Law of the Illinois Vehicle Code or Section 11-501.1 of
the Illinois Rules of the Road of the Illinois Vehicle Code within 5
years prior to the date of application.

B) the applicant fails to properly make application for such license.

C) the applicant is not employed by a third-party certifying entity.

D) the applicant is currently a salaried employee of the Secretary of
State.

E) the applicant is not at least 21 years of age.

F) the applicant submits a fraudulent application.

G) the applicant owes outstanding fees to the Secretary of State.

H) the applicant's driver's license is currently canceled, suspended or
revoked.

I) the applicant's driver's license has been suspended or revoked
within a period after 5 years of the date of application. However,
suspensions related to auto emissions and parking are exempt from
the five year period after the suspension is terminated.

J) the applicant has not held, for at least 2 years immediately
preceding application, a valid license in the classification and/or
endorsement in which he intends to test, or the equivalent under
the classification system prior to April 1, 1990.

K) the applicant does not meet the requirements provided in
subsection (i)(1)(H) of this Section.

L) the applicant does not hold a valid Illinois driver's license or a
driver's license from a contiguous state in the classification and/or
endorsement in which he/she intends to skills test.
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M) the applicant is an owner or instructor of a commercial driver training school.

3) The Secretary of State shall immediately cancel a safety officer's license upon evidence that:

A) the individual's driver's license is currently canceled, suspended or revoked.

B) the individual's driver's license has been suspended or revoked within a period of 5 years after the date of application. However, suspensions related to auto emissions and parking are exempt from the 5 year period after the suspension is terminated.

C) the individual has not held, for at least 2 years immediately preceding application, a valid license in the classification in which he/she intends to test or the equivalent under the classification system prior to April 1, 1990, unless it is a CDL classification or endorsement.

D) the individual intends to skills test CDL driver applicants, but has not received training equivalent to that given to Secretary of State examiners administering CDL driving skills tests.

E) the individual is no longer employed by the third-party certification entity or no longer has a valid license.

F) the individual is currently a salaried employee of the Secretary of State.

G) the individual owes outstanding fees to the Secretary of State.

H) the individual fails to administer a minimum of 12 skills tests to candidates for employment or membership as required in subsection (b)(3)(B) of this Section.

I) the individual is an owner or instructor of a commercial driver training school.
4) The Secretary of State shall suspend a safety officer's license:
   A) if it is discovered the safety officer is certifying applicants who have not obtained instruction permits, and/or have not maintained such instruction permits for at least 2 weeks prior to testing and certification.
   B) for improper record keeping in violation of subsection (d)(11) of this Section; and
   C) upon any violation of this Part.

5) The Secretary of State shall revoke a safety officer's license upon receipt of evidence that:
   A) the individual has been convicted of driving under the influence of alcohol, other drugs, or a combination thereof; leaving the scene of an accident; or reckless homicide or reckless driving, or is suspended under Section 6-206(a)(3) or 11-501.1 of the Illinois Vehicle Code within 5 years prior to the date of application.
   B) the individual submits a fraudulent application.
   C) the individual engages in or permits any type of fraudulent activity, either with reference to a student or the Secretary of State, which includes but is not limited to certifying a person not eligible.

6) The Secretary of State shall have the discretionary authority to issue warning letters to third-party certifying entities or safety officers for violations of the regulations and laws governing commercial driver training schools as found in this Part and Article IV of the Illinois Driver Licensing Law of the Illinois Vehicle Code.

j) Hearings

1) Prior to the denial of a third-party entity and/or safety officer's license, the Department shall send written notice to that person and/or entity. If a formal hearing is requested, the request must be in writing during the
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notice period. The basis for denial of a license is stated in subsections (g)(1) through (6) and (i)(2)(A) through (L) of this Section.

2) Prior to the suspension or revocation of the license or accreditation of a third-party certifying entity or safety officer, the Department will conduct a hearing in accordance with 92 Ill. Adm. Code 1001, Subpart A and Section 2-118 of the Illinois Vehicle Code [625 ILCS 5/2-118], wherein the Department will present competent evidence to establish violations of any regulations or laws governing third-party entities and/or safety officers and seek the appropriate sanctions in accordance with this Section.

k) Review Under Administrative Law. Judicial Review - The action of the Secretary of State in canceling, suspending, revoking or denying any license under this Act shall be subject to judicial review in the Circuit Court of Sangamon County or the Circuit Court of Cook County, pursuant to Section 2-118 of the Illinois Vehicle Title and Registration Law of the Illinois Vehicle Code [625 ILCS 5/2-118] and the provisions of the Administrative Review Law [735 ILCS 5/Art. 3]. All the provisions and modifications thereto, and all the rules adopted thereto, are hereby adopted and shall apply to and govern every action for judicial review of the final acts or decisions of the Secretary of State under this Section.

(Source: Amended at 31 Ill. Reg. ______, effective _____________)
DEPARTMENT OF PUBLIC HEALTH

NOTICE OF PROPOSED AMENDMENTS

1) Heading of the Part: Podiatric Scholarship and Residency Programs Code

2) Code Citation: 77 Ill. Adm. Code 593

3) Section Numbers: Proposed Action:
   593.10    Amendment
   593.20    Amendment
   593.200   Amendment
   593.240   Amendment

4) Statutory Authority: Podiatry Scholarship and Residency Act [110 ILCS 978]

5) A Complete Description of the Subjects and Issues Involved: This rulemaking expands the podiatric scholarship and residency program to increase the number of years that a student is eligible to receive the scholarship from two to the full four years that it takes to complete podiatric medical school. The current rules provide scholarship recipients with full tuition and mandatory fees. This rulemaking will provide for the award of a monthly living stipend to the scholarship recipient. The rulemaking also adds definitions of "rural" and "urban" and updates referenced materials.

6) Published studies or reports, and sources of underlying data, used to compose this rulemaking: None

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

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

9) Does this rulemaking contain incorporations by reference? No

10) Are there any other proposed rulemakings pending on this Part? No

11) Statement of Statewide Policy Objectives: This rulemaking will not create or expand a State Mandate.

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

   Interested persons may present their comments concerning this rulemaking within 45 days after this issue of the Illinois Register to:
DEPARTMENT OF PUBLIC HEALTH

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Susan Meister
Division of Legal Services
Illinois Department of Public Health
535 W. Jefferson St., 5th floor
Springfield, Illinois 62761

217/782-2043
e-mail: rules@idph.state.il.us

13) 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

14) Regulatory Agenda on which this rulemaking was summarized: January 2007

The full text of the Proposed Amendments begins on the next page:
DEPARTMENT OF PUBLIC HEALTH

NOTICE OF PROPOSED AMENDMENTS

TITLE 77: PUBLIC HEALTH
CHAPTER I: DEPARTMENT OF PUBLIC HEALTH
SUBCHAPTER g: GRANTS TO DENTAL AND MEDICAL STUDENTS

PART 593
PODIATRIC SCHOLARSHIP AND RESIDENCY PROGRAMS CODE

SUBPART A: GENERAL PROVISIONS

Section
593.10 Definitions
593.20 Referenced Incorporated Materials
593.30 Administrative Hearings

SUBPART B: GRANTS TO PODIATRIC PRACTICE RESIDENCY PROGRAMS

Section
593.100 Eligibility for Grants
593.110 Limitations on Use of Grant Funds
593.120 Project Requirements
593.130 Application for Grants
593.140 Selection Criteria

SUBPART C: PODIATRIC MEDICAL STUDENT SCHOLARSHIPS

Section
593.200 Limitations on Use of Scholarship Funds
593.210 Eligibility for Application
593.220 Criteria for Selecting Scholarship Recipients
593.230 Terms of Performance
593.240 Scholarship Repayments

AUTHORITY: Podiatry Scholarship and Residency Act [110 ILCS 978]


SUBPART A: GENERAL PROVISIONS
DEPARTMENT OF PUBLIC HEALTH

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Section 593.10  Definitions

"Act" means the Podiatric Scholarship and Residency Act [110 ILCS 978].

"Department" means the Illinois Department of Public Health. (Section 10 of the Act)

"Designated Shortage Area" means an area designated by the Director as a physician shortage area, a medically underserved area, or a critical health manpower shortage area as defined by the United States Department of Health and Human Services, or as further defined by the Department to enable it to effectively fulfill the purpose stated in Section 5 of the Act. These areas may include the following:

- an urban or rural area;
- a population group; or
- a public or nonprofit private medical facility. (Section 10 of the Act)

"Director" means the Director of the Illinois Department of Public Health. (Section 10 of the Act)

"Eligible Podiatry Student" means a person who meets all of the following qualifications:

He or she is an Illinois resident at the time of application for scholarship under the program established by this Act.

He or she is studying podiatric medicine in a podiatry school located in Illinois.

He or she exhibits financial need as determined by the Department.

He or she agrees to practice full-time in a designated shortage area as a primary care physician one year for each year he or she is a scholarship recipient. (Section 10 of the Act)

"Full-time Practice" means maintaining office hours for patient care for at
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least 20 hours per week.

"Medical Facility" means a facility for the delivery of Health Services and includes a hospital, State mental health institution, public health center, outpatient medical facility, rehabilitation facility, long-term care facility, community mental health center, migrant health center, a community health center, or a State correctional institution. (Section 10 of the Act)

"Minority" means any person or group of persons who are: African-American (a person having origins in any of the black racial groups in Africa); Hispanic (a person of Spanish or Portuguese culture with origins in Mexico, South or Central America, or the Caribbean Islands, regardless of race); Asian American (a person having origins in any of the original peoples of the Far East, Southeast Asia, the Indian Subcontinent or the Pacific Islands); or American Indian or Alaskan Native (a person having origins in any of the original peoples of North America).

"Podiatric Practice Residency Program" means a program accredited by the Council of Podiatric Medical Education. Residencies may be primary care or rotating. (Section 10 of the Act)

"Primary Care Physician" means a person licensed to practice podiatric medicine under the Podiatric Medical Act of 1987 [225 ILCS 100]. (Section 10 of the Act)

"Residency Matching Process matching process" means the matching of podiatric medical students with residency training programs in the student's selected specialty.

"Residency Training" means the years of graduate medical education that follow podiatric medical school and train the new podiatric physician in his or her chosen specialty.

"Rural" means any geographic area not located in a U.S. Bureau of the Census Metropolitan Statistical Area; or a county located within a Metropolitan Statistical Area but having a population of 60,000 or less; or a community located within a Metropolitan Statistical Area but having a population of 2,400 or less or a RUCA Code 4 or above on the Rural-Urban Commuting Area list as defined by the U.S. Department of Agriculture Economic Research Service. The list of Rural-Urban Commuting Area Codes can be found at: http://www.fammed.washington.edu/wwamirhrc/rucas/rucas.html
"Urban" means all territory, population and housing units in urban areas, which include urbanized areas and urban clusters. An urban area generally consists of a large central place and adjacent, densely settled census blocks that together have a total population of at least 2,500 for urban clusters, or at least 50,000 for urbanized areas. Urban classification cuts across other hierarchies and can be in metropolitan or non-metropolitan areas.

(Source: Amended at 31 Ill. Reg. _____, effective ____________)

Section 593.20 **Referenced** Incorporated Materials

The following materials are incorporated or referenced in this Part:

a) Illinois Statutes

   1) Podiatric Scholarship and Residency Act [110 ILCS 978]


c) All incorporations by reference of standards of nationally recognized organizations refer to the standards on the date specified and do not include any additions or deletions subsequent to the date specified.

(Source: Amended at 31 Ill. Reg. _____, effective ____________)

**SUBPART C: PODIATRIC MEDICAL STUDENT SCHOLARSHIPS**

Section 593.200 Limitations on Use of Scholarship Funds

a) Scholarships shall cover the cost of tuition and matriculation fees and provide a monthly living stipend for selected podiatric medical students.

b) Scholarship funds shall be expended by the recipient only while enrolled and in good academic standing at a podiatric medical school.
c) Scholarship funds shall not be awarded for expenses incurred when the student must repeat more than once an academic term or terms, if the repetition is necessary because the student has an academic performance below an acceptable level as determined by the student's podiatric medical school.

d) Scholarship funds shall be provided to the recipient's podiatric medical school. All funds for tuition and fees are to be expended only on the podiatric medical student's behalf. All stipend monies are to be provided directly to the podiatric medical student.

e) Scholarship funds shall not be awarded to any podiatric medical student for more than forty-two academic years.

(Source: Amended at 31 Ill. Reg. ______, effective ____________)

Section 593.240 Scholarship Repayments

a) Upon the Illinois licensure of the scholarship recipient to practice podiatric medicine, the recipient shall provide podiatric primary health care in a designated shortage area of Illinois. The term of this service shall be one year for each academic year he or she is a scholarship recipient.

b) Service as a podiatric physician shall begin no later than 30 days after the licensure of the recipient to practice podiatric medicine. Service shall be deferred by the Department until the recipient completes a podiatric care residency; service shall begin no later than 30 days after completion.

1) Service shall be deferred by the Department until recipient completes a podiatric care residency; service shall begin no later than 30 days after completion.

2) If recipient leaves the residency program prior to completion, service shall begin with 30 days.

c) The recipient's internship, residency or other advanced clinical training does not qualify as service repayment of the scholarship obligation.

d) Written approval of the Department for a proposed practice location shall be
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requested and received by the scholarship recipient.

1) Without such approval, time in practice at such a location shall not meet the scholarship recipient's service obligation.

2) The scholarship recipient may request approval for a practice location up to 18 months preceding the time practice at the location is to begin.

3) Approval for a practice location is granted for the duration of the scholarship recipient's service obligation.

e) The scholarship recipient's practice shall meet the following requirements:

1) be located in a designated shortage area;

2) be a full-time, office-based practice providing direct patient care; and

3) provide continuous service at the rate of 12 months for each academic year of podiatric medical school supported by the scholarship.

f) Scholarship recipients may relocate to another practice location, or practice in more than one location, if prior written approval is granted by the Department.

g) Scholarship recipients shall enter into a written contract with the Department that describes terms of the service obligation and contains provisions for enforcement of the contract.

h) Scholarship recipients who fail to fulfill their obligation to practice in designated shortage areas shall pay to the Department a sum equal to 3 times the amount of the annual scholarship grant for each year the recipient fails to fulfill that obligation. (Section 30 of the Act)

1) Payment shall be made in equal monthly installments in such amounts so that all sums due shall be paid within a period of time equal to the recipient's service term, or remaining portion of the term, or as otherwise agreed to by the recipient and the Department.

2) The recipient and Department shall enter into a written contract that describes terms of the repayment and contains provisions for
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enforcement of the contract.

i) **If** a scholarship recipient fails to pay monies owed the Department, the Department may refer the matter to the Attorney General or to a collection agency.

(Source: Amended at 31 Ill. Reg. _______, effective _____________)
DEPARTMENT OF HUMAN SERVICES

NOTICE OF ADOPTED AMENDMENTS

1) Heading of the Part: Children's Mental Health Screening, Assessment and Support Services Program

2) Code Citation: 59 Ill. Adm. Code 131

3) Section Numbers: Adopted Action:
   131.20    Amended
   131.30    Amended
   131.50    Amended
   131.60    Amended
   131.70    Amended

4) Statutory Authority: Authorized by and implementing the Children’s Mental Health Act of 2003 [405 ILCS 49] and Section 5-5.23 of the Illinois Public Aid Code [305 ILCS 5/5-5.23]

5) Effective Date of Amendments: July 13, 2007

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 the Illinois Register: March 9, 2007; 31 Ill. Reg. 3692

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

11) Differences between proposal and final version:

   A) Section 131.30c(3) after "medical assistance" (e.g. the family may not be able to comply with the requirement to gather the necessary information required to file an application for Medicaid or All Kids due to medical reasons, such as impending surgery or long term medical illness, or the family refuses to comply because family members are undocumented)."

   B) Section 131.30c(3) this last sentence was added: "A hospital or community mental health provider may report that it finds it impossible to assist the family in
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applying only if the family refuses to apply due to incapacitating medical or psychiatric illness reasons, or because family members are undocumented.

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

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

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

15) Summary and purpose of Rulemaking: This rulemaking affects the Division of Mental Health and will establish eligibility exceptions and provide reimbursement for psychiatric physician services for a child enrolled in the SASS program.

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

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

217/785-9772

17) Does this amendment require the preview of the Procurement Policy Board as specified in Section 5-25 of the Illinois Procurement Code? No

The full text of the Adopted Amendments begins on the next page:
PART 131
CHILDREN'S MENTAL HEALTH SCREENING, ASSESSMENT
AND SUPPORT SERVICES PROGRAM

Section 131.10  Purpose
131.20  Definitions
131.30  Eligibility
131.40  Screening Requirement
131.50  Program Services
131.60  Billing for Services
131.70  Accountability
131.APPENDIX A  DHS/DMH Target Population

AUTHORITY:  Authorized by and implementing the Children's Mental Health Act of 2003 [405 ILCS 49] and Section 5-5.23 of the Illinois Public Aid Code [305 ILCS 5/5-5.23].


Section 131.20  Definitions

For the purposes of this Part, the following terms are defined:

"CARES" – Crisis and referral entry services. The agent under contract with HFS, DPA, DCFS, or DHS to perform certain administrative functions on the State agency's behalf.

"CMHS" – Community mental health services.


"DHS-DMH" – The Illinois Department of Human Services/Division of Mental Health.
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"HFSDPA" – The Illinois Department of Healthcare and Family Services Public Aid.

"SASS" – Screening, assessment and support services.

"SASS agent" – A provider of CMHS, under contract with HFSDPA, DCFS or DHS to screen children in psychiatric crisis who are believed to be in need of admission to an inpatient facility.

"SASS period" – A 90-day period beginning with the date that the SASS agent begins initial screening of a child in psychiatric crisis. The period may be extended beyond 90 days if it has been determined to be clinically necessary to do so by DCFS (for children for whom DCFS is legally responsible) or DHS (for any other child).

(Source: Amended at 31 Ill. Reg. 10635, effective July 13, 2007)

Section 131.30 Eligibility

A child eligible for services provided under this Part is:

a) An individual for whom DCFS is legally responsible;

b) An individual under 21 years of age who is enrolled, pursuant to 89 Ill. Adm. Code 118, 120, 123 or 125, in one of the medical programs administered by HFSDPA, except that any child who is enrolled in a managed care organization is not eligible; or

c) Subject to funding that is appropriated and available to DHS-ADMH for the SASS program, an individual who is under 18 years of age and who meets one of the following criteria:

1) An individual who, following submission of a completed application, does not qualify under subsection (b); or

2) An individual who meets criteria for the DHS-ADMH target population (see Appendix A) and requires intensive community-based services in the SASS program, has no other means of payment as determined by the
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DHS-DMHS SASS provider, and is seeking public payment for services covered under this Part; or,

3) An individual whose family is unable, unwilling, or refuses to apply for medical assistance (e.g., the family may not be able to comply with the requirement to gather the necessary information required to file an application for Medicaid or All Kids due to medical reasons, such as impending surgery or long term medical illness, or the family refuses to comply because family members are undocumented), or if the SASS agent, hospital or community mental health provider finds it impossible to assist the family in applying, may be permitted an exception to this requirement only in these instances. A request for an exception may be made by contacting DHS-DMH. A hospital or community mental health provider may report that it finds it impossible to assist the family in applying only if the family refuses to apply due to incapacitating medical or psychiatric illness reasons, or because family members are undocumented.

(Source: Amended at 31 Ill. Reg. 10635, effective July 13, 2007)

Section 131.50 Program Services

a) Community Mental Health Services

1) Children, as a result of the mental health screening required under Section 131.40, for whom it has been determined by a SASS agent that appropriate alternative resources are available in the community shall be referred to those services by the SASS agent. Community mental health services (CMHS) shall be reimbursed by HFS, DCFS or DHS only under the following conditions:

A) The CMHS provider is enrolled with the HFS to participate in the Illinois medical assistance program and meets the requirements for certification and payment under 59 Ill. Adm. Code 132.

B) The CMHS provider is one of the following:

i) The SASS agent to which responsibility for managing the child’s care was assigned by CARES.
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ii) Another CMHS provider that, through CARES, is authorized to provide CMHS to children.

C) The service is provided in accordance with the plan of care developed by the SASS agent.

D) The service is provided during the SASS period.

E) The patient was a child at the time of screening and met eligibility requirements specified in Section 131.30(c).

2) Payment shall be made utilizing rates of reimbursement established under 59 Ill. Adm. Code 132.

b) Pharmacy Services

1) DHS shall pay for certain prescribed drugs dispensed to a child who meets DHS eligibility requirements in Section 131.30(c). Pharmacy services, other than those provided by an inpatient psychiatric facility, shall be reimbursed only under the following conditions:

A) The pharmacy provider is enrolled with HFS to participate in the Illinois medical assistance program.

B) The service is provided in accordance with the plan of care developed by the SASS agent.

C) The service was provided during the SASS period.

D) The patient was a child at the time of screening.

E) The prescribed drug has been determined by DHS/DMH as appropriate for the treatment of serious emotional disturbance or mental illness or related symptoms.

2) Payment shall be made utilizing rates of reimbursement established under the provisions of 89 Ill. Adm. Code 140.444 and 140.445.
c) Transportation Services

1) DHS shall pay for certain emergency and non-emergency transportation services provided to a child who meets DHS eligibility criteria specified in Section 131.30(c). Transportation services, other than those provided by an inpatient psychiatric facility, shall be reimbursed only under the following conditions:

A) The transportation provider is enrolled with HFS DPA to participate in the Illinois medical assistance program.

B) The transportation is in support of the plan of care developed by the SASS agent and is to or from a source of medical care covered under this Part.

C) The service was provided during the SASS period.

D) The patient was a child at the time of screening.

2) Payment shall be made utilizing rates of reimbursement established under 89 Ill. Adm. Code 140.492 and 140.493.

d) Inpatient Psychiatric Services

1) DHS shall pay for certain inpatient psychiatric services provided to a child who meets DHS eligibility criteria specified in Section 131.30(c). Inpatient psychiatric services, other than those provided by an inpatient psychiatric facility operated by DHS, shall be reimbursed only under the following conditions:

A) The inpatient facility is enrolled with HFS DPA to participate in the Illinois medical assistance program and meets the special requirements for inpatient psychiatric services found at 89 Ill. Adm. Code 148.40(a).

B) Prior to admission, the individual shall be screened by a SASS agent to determine the appropriateness of an inpatient admission and the availability of alternative treatment resources in the community.
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C) The admission is approved by DHS or its agent.

D) Prior to discharge, the SASS agent participated in the development of the discharge plan.

E) The date of admission was during the SASS period.

F) The patient was a child at the time of admission.

2) Payment shall be made utilizing rates of reimbursement established for the medical assistance program under 89 Ill. Adm. Code 148.270 and 89 Ill. Adm. Code 152.200, subject to utilization review or pre- or post-payment reviews, as applicable.

e) Psychiatric Physician Services

A child eligible for psychiatric physician services must be currently enrolled in a SASS program and must meet the requirements under Section 131.30(c)(1) and (2).

1) Physician services shall be reimbursed only under the following conditions:

A) The physician is enrolled with HFS to participate in the Illinois Medical Assistance Program.

B) The service is one of the following:

i) Psychiatric diagnostic interview examination inpatient and outpatient by a SASS staff psychiatrist;

ii) Electroconvulsive therapy (includes necessary monitoring), single and multiple seizures per day. Electroconvulsive therapy must have prior approval from DHS;

iii) Individual psychotherapy, insight oriented behavior modifying and/or supportive that is approximately 20-80 minutes face to face with the patient with medical evaluation and management services provided in a hospital.
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inpatient setting only, during an inpatient psychiatric stay; or

iv) Individual psychotherapy, interactive, using play equipment, physical devices, language interpreter, or other mechanisms of non-verbal communication, approximately 20-80 minutes face to face with the patient with medical evaluation and management services.

C) The service was provided during the SASS period.

D) The patient was a child at the time of screening.

2) Payment shall be made utilizing rates of reimbursement established under the provisions of 89 Ill. Adm. Code 140.410 through 140.414.

(Source: Amended at 31 Ill. Reg. 10635, effective July 13, 2007)

Section 131.60 Billing for Services

All program services described in this Part are provided and billed to HFS DPA in accordance with that agency's policies as found in the HFS DPA Handbook for Providers of Medical Services Screening, Assessment and Support Services (found at www.hfs.illinois.gov/ www.dpaillinois.com/handbooks/), including any necessary prior authorization for the service.

(Source: Amended at 31 Ill. Reg. 10635, effective July 13, 2007)

Section 131.70 Accountability

a) All payments made under this Part are subject to post-payment review and audit pursuant to the applicable rules under which the rates of reimbursement were established (see 89 Ill. Adm. Code 140.30, 140.410 through 140.414, 140.444, 140.455, 140.492, 140.493; 89 Ill. Adm. Code 148.270; and 89 Ill. Adm. Code 152.200).

b) HFS DPA, DHS and DCFS shall implement a systematic process to assess the accessibility, effectiveness, and quality of services provided under this Part.
c) Hospitals and CMHS providers providing services under this Part will be required to participate and cooperate fully in any monitoring and quality improvement efforts undertaken by HFS DPA, DCFS and/or DHS.

d) DHS, DCFS and HFS DPA reserve the right to ensure that appropriate standards of treatment and service delivery are maintained for any individual child or for the system, including on-site inspection and individual consultation.

(Source: Amended at 31 Ill. Reg. 10635, effective July 13, 2007)
STATE BOARD OF EDUCATION
NOTICE OF ADOPTED AMENDMENTS

1) Heading of the Part: Certification

2) Code Citation: 23 Ill. Adm. Code 25

3) Section Numbers: Adopted Action:
   25.30    New Section
   25.85    Amendment
   25.314   New Section
   25.335   Amendment
   25.620   Amendment
   25.750   Amendment
   25.755   Amendment

4) Statutory Authority: 105 ILCS 5/Art. 21, 14C-8, and 2-3.6

5) Effective Date of Amendments: July 16, 2007

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: March 9, 2007; 31 Ill. Reg. 3643

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

11) Differences between proposal and final version: The focus of the teacher leader endorsement was changed by eliminating the reliance on certain standards for administrators to emphasize content-area knowledge and reflect more accurately the role of teacher leaders as that term is commonly understood. Provisions were added for institutions to select from their approved strands of coursework the courses and experiences that individual teachers would need in light of their previous preparation and achievements. The addition of further subject-area designations was also addressed.

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 rulemaking currently in effect? No
14) Are there any other proposed rulemakings pending on this Part? No

15) Summary and Purpose of Amendments: This rulemaking involves several unrelated aspects of Part 25.

This rulemaking presents proposed requirements for two new certification-related initiatives that were established in 2006 by P.A. 94-1039: a teacher leader endorsement and an alternative route to administrative certification. Proposed new Section 25.30 sets forth requirements for the teacher leader endorsement. The statute establishes three somewhat different sets of qualifications leading to this endorsement, two of which rely on completion of a "specially designed strand of teacher leadership courses" in combination with other requirements. This rule defines the strand of coursework and identifies who will be considered a "proven teacher leader".

Proposed new Section 25.314 implements Section 21-5e of the School Code, which identifies individuals eligible to complete an alternate route to administrative certification. This route calls only for completion of 15 semester hours aimed at certain administrative competencies. The statute contemplates taking into consideration the coursework individuals will already have completed, so the rule calls for the 15 semester hours to focus on the management-related aspects of the Illinois Professional Teaching Standards and on selected others applicable to the general administrative endorsement. Several of the other provisions of the new rule are similar to those used in Section 25.313, an older "alternative route" rule. The revision to Section 25.335 is related to both of these, in that it acknowledges the exceptions to the general rule that are incorporated in the two different alternative routes.

The revision to Section 25.85 will make endorsements in certain foreign languages (generally candidates' native languages) available on a streamlined basis to individuals who were prepared as teachers outside Illinois and could have received those endorsements when they originally received Illinois certificates. It has become clear that some foreign applicants are not aware of this provision when they originally apply, and it makes more sense for them to have continued access to the language endorsement on the basis of Section 25.86 even after they have attained Illinois certification in some other field rather than to fall under Section 25.85.

The revision to Section 25.620 responds directly to recent changes in the Grow Your Own Teacher Education Act and in Section 21-2.1 of the School Code (Early Childhood Certificate) which expressly permit payment to certain student teachers. This is a technical update bringing the rule into conformance with those new statutory provisions.
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Changes in Section 25.750 (Conditions of Testing) establish a new requirement for thumb-printing of individuals taking certification tests. Important goals of this rule are to provide a deterrent to the method of cheating that involves test-taking by someone other than the candidate for certification and to decrease the reliance on handwriting analysis in cases where there is doubt as to the identity of the individual taking a test.

Section 25.755 (Voiding of Scores) is being amended to clarify that there are certain records and voided scores that may be kept.

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

    Linda Jamali
    Certification Division
    Illinois State Board of Education
    100 North First Street
    Springfield, Illinois 62777-0001

    217/782-7702

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

NOTICE OF ADOPTED AMENDMENTS

TITLE 23: EDUCATION AND CULTURAL RESOURCES
SUBTITLE A: EDUCATION
CHAPTER I: STATE BOARD OF EDUCATION
SUBCHAPTER b: PERSONNEL

PART 25
CERTIFICATION

SUBPART A: DEFINITIONS

Section
25.10 Definition of Terms Used in This Part (Repealed)

SUBPART B: CERTIFICATES

Section
25.11 New Certificates (February 15, 2000)
25.15 Standards for Certain Certificates (Repealed)
25.20 Requirements for the Elementary Certificate (Repealed)
25.25 Requirements for "Full" Certification
25.30 Endorsement in Teacher Leadership
25.35 Acquisition of Subsequent Certificates; Removal of Deficiencies (Repealed)
25.37 Acquisition of Subsequent Teaching Certificates (2004)
25.40 Requirements for the Special Certificate (Repealed)
25.43 Standards for Certification of Special Education Teachers
25.45 Standards for the Standard Special Certificate – Speech and Language Impaired
25.50 General Certificate (Repealed)
25.60 State Special Certificate, Grades 11-12, For Teaching Elective Subjects (Repealed)
25.65 Alternative Certification
25.67 Alternative Route to Teacher Certification
25.70 State Provisional Vocational Certificate
25.75 Part-time Provisional Certificates
25.80 Requirements for the Early Childhood Certificate (Repealed)
25.85 Special Provisions for Endorsement in Foreign Language for Individuals
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Currently Certified

25.86 Special Provisions for Endorsement in Foreign Language for Individuals Prepared as Teachers But Not Currently Certified
25.90 Transitional Bilingual Certificate and Examination
25.92 Visiting International Teacher Certificate
25.95 Majors, Minors, and Separate Fields for the Illinois High School Certificate (Repealed)
25.99 Endorsing Teaching Certificates (Repealed)
25.100 Endorsing Teaching Certificates (2004)
25.105 Temporary Substitute Teaching Permit

SUBPART C: APPROVING PROGRAMS THAT PREPARE PROFESSIONAL EDUCATORS IN THE STATE OF ILLINOIS

Section
25.110 System of Approval: Levels of Approval (Repealed)
25.115 Recognition of Institutions, Accreditation of Educational Units, and Approval of Programs
25.120 Standards and Criteria for Institutional Recognition and Program Approval (Repealed)
25.125 Accreditation Review of the Educational Unit
25.127 Review of Individual Programs
25.130 Special Provisions for Institutions Subject to Conditions for Continuing Accreditation
25.135 Interim Provisions for Continuing Accreditation and Approval – July 1, 2000, through Fall Visits of 2001
25.137 Interim Provisions for Continuing Accreditation and Approval – July 1, 1999, through June 30, 2000 (Repealed)
25.140 Requirements for Educational Unit Assessment Systems
25.142 Assessment Requirements for Individual Programs
25.145 Approval of New Programs Within Recognized Institutions
25.147 Approval of Programs for Foreign Language Beginning July 1, 2003
25.150 The Periodic Review Process (Repealed)
25.155 Initial Recognition Procedures
25.160 Notification of Recommendations; Decisions by State Board of Education
25.165 Discontinuation of Programs

SUBPART D: SCHOOL SERVICE PERSONNEL
STATE BOARD OF EDUCATION

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AUTHORITY: Implementing Article 21 and Section 14C-8 and authorized by Section 2-3.6 of the School Code [105 ILCS 5/Art. 21, 14C-8, and 2-3.6].

SUBPART B: CERTIFICATES
Beginning July 1, 2007, endorsement as a teacher leader shall be available to persons who fulfill the requirements of this Section. The teacher leader endorsement shall be an optional, advanced credential and shall not be subject to the provisions of Section 25.100 of this Part, except that payment of the fee specified in Section 21-12 of the School Code [105 ILCS 5/21-12] shall be required.

a) The teacher leader endorsement shall include a designation identifying the area of the individual's master's degree in teacher leadership, if any, or reflecting the content area in which the individual holds certification from the National Board for Professional Teaching Standards (NBPTS), holds a master's degree, or has completed a major field of specialization and demonstrates the leadership experience called for in subsection (d) of this Section. Additional subject-specific designations may be added to a teacher leader endorsement in accordance with the provisions of subsection (g) of this Section.

b) Eligibility of Teachers
Each applicant for endorsement as a teacher leader shall hold a standard or master early childhood, elementary, secondary, special K-12, or special preschool-age 21 certificate, including an alternative certificate of one of these types, or an administrative certificate that is valid for teaching.

c) Strand of Coursework
Only Illinois institutions of higher education that conduct approved teacher preparation programs shall be eligible to offer the "specially designed strand of teacher leadership courses" discussed in Section 21-7.5 of the School Code [105 ILCS 5/21-7.5].

1) Each institution's strand of coursework shall include a range of graduate-level courses addressing subject-specific content knowledge and pedagogy, as well as professional development and curriculum design and implementation. In order to avoid duplicating an individual's prior preparation or experience in these areas, the institution shall select the specific courses from the approved strand that will make up the required program for that individual.
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2) In order to receive approval for its proposed strand of coursework, an institution shall submit to the State Superintendent of Education, in a format required by the State Superintendent, a program description that:

   A) identifies the group of courses that will make up the strand;

   B) describes the institution’s method for selecting coursework and experiences from the approved strand for particular individuals in light of those individuals’ prior preparation and achievements, in order to ensure that recipients of the teacher leader endorsement are prepared to understand and interpret research in their individual fields, exercise leadership in curriculum development and implementation, and provide professional development to other teachers to assist them in strengthening their teaching practice; and

   C) indicates how the institution will determine that individuals who complete the teacher leader endorsement program have demonstrated the dispositions necessary to become effective instructional leaders.

3) The institution may be asked to clarify or revise aspects of its proposal as necessary. The State Superintendent of Education shall seek a recommendation from the State Teacher Certification Board regarding approval of the proposal, shall present the recommendation to the State Board of Education, and shall provide a response to the institution within 90 days after receipt of the proposal or the last revisions to it. If the State Board of Education disapproves the proposal, the State Superintendent’s response shall identify the specific deficiencies upon which disapproval is based. When the State Board has approved a proposal, the institution shall be authorized to recommend individuals who complete its teacher leadership program for the teacher leader endorsement with the individuals' original subject-area designations, as well as any additional subject-area designations for which individuals qualify under subsection (g) of this Section.

d) Proven Teacher Leader
   To be considered a "proven teacher leader" for purposes of this Section, an individual shall provide letters signed by the chief administrators or other designated officials of the employing school districts or nonpublic schools
documenting that the individual has no fewer than four semesters' experience in service in any of the following capacities, in any combination:

1) department or grade-level chair;
2) mentor or peer coach;
3) member of a school improvement team; or
4) leader of a curriculum development team.

e) When an institution recommends an individual for the teacher leader endorsement based on his or her completion of an approved strand of coursework, the recommendation shall signify that the institutional representative has also verified either:

1) that the applicant's name appears on the composite list of teachers who hold certification from the National Board for Professional Teacher Standards (NBPTS) that is posted by the NBPTS; or
2) that an official transcript or, in the case of an individual prepared at an institution outside the United States, a statement from an evaluation service approved under Section 25.425 of this Part, shows that the applicant holds a master's degree in any field and that the individual has presented evidence that he or she qualifies as a "proven teacher leader" under subsection (d) of this Section.

f) Master's Degree in Teacher Leadership
An individual seeking the teacher leader endorsement based on completion of a master's degree program in teacher leadership shall submit an application accompanied by the required fee and an official transcript showing that he or she holds an advanced degree in teacher leadership from an Illinois teacher preparation institution or a comparable degree granted by an out-of-state institution that prepares teachers.

g) Additional Designations
An individual who earns a teacher leader endorsement in one subject area by meeting the applicable requirements of this Section may add further designations denoting those additional subject areas in which he or she is considered "highly qualified" pursuant to Appendix D to this Part. For additional designations sought
by application to the State Superintendent of Education after issuance of the original teacher leader endorsement, the fee required by Section 21-12 of the School Code shall apply.

(Source: Section repealed at 29 Ill. Reg. 15831, effective October 3, 2005; new Section adopted at 31 Ill. Reg. 10645, effective July 16, 2007)

**Section 25.85 Special Provisions for Endorsement in Foreign Language for Individuals Currently Certified**

The provisions of this Section shall apply when individuals who hold Illinois certification in one or more fields wish to teach a foreign language but either lack certification appropriate to the grade level of the assignment or have not completed 20 hours of coursework as required to obtain an endorsement in the language (see 23 Ill. Adm. Code 1.730(h)).

a) The provisions of this subsection (a) shall apply to each individual who holds a certificate endorsed for a particular language but whose certification does not extend to other grade levels as needed for an available assignment. (Example: A holder of a secondary (6-12) certificate endorsed for French who wishes to teach French in the fourth grade.)

1) An individual to whom this subsection (a) applies may receive an endorsement valid for teaching the specified language at the remaining grade levels by:

   A) submitting the required application for the endorsement, and

   B) passing the assessment of professional teaching relevant to the remaining grade levels.

2) With regard to major teaching assignments (i.e., at least 50 percent of the school day) in departmentalized grades 5 through 8, the requirements of 23 Ill. Adm. Code 1.720 (Minimum Requirements for Teachers of Middle Grades) shall apply to any individual who has not passed an assessment of professional teaching relevant to a certificate other than the early childhood certificate.

b) The provisions of this subsection (b) shall apply to each individual who holds an early childhood, elementary, secondary, special K-12, or special preschool-age 21 certificate and wishes to teach a language in which he or she has not completed 20
semester hours of coursework, except that the provisions of Section 25.86 of this Part shall also continue to be available to an affected individual who seeks a language endorsement after receiving an Illinois certificate. (Example: A holder of a secondary (6-12) certificate endorsed for mathematics who wishes to teach Korean.)

1) In order to qualify under this subsection (b), an individual shall submit an application for an endorsement in the specified language at the grade levels of his or her certificate and shall be required to have passed the test relative to that language as listed in Section 25.710 of this Part or, if the language is not listed in that Section, another test identified by the State Board of Education. If the language is listed more than once in that Section, the required test shall be the test not listed under "Transitional Bilingual Education". (Example: Spanish)

2) An individual who has received an endorsement pursuant to this subsection (b) may receive an endorsement for other grade levels as provided in subsection (a)(1) of this Section.

(Source: Amended at 31 Ill. Reg. 10645, effective July 16, 2007)

SUBPART E: REQUIREMENTS FOR THE CERTIFICATION OF ADMINISTRATIVE AND SUPERVISORY STAFF

Section 25.314 Alternative Route to Administrative Certification for Teacher Leaders

a) Section 21-5e of the School Code [105 ILCS 5/21-5e] provides for the issuance of administrative certificates to "teacher leaders", i.e., teachers who:

1) hold certification from the National Board for Professional Teaching Standards (NBPTS); and

2) hold endorsements as teacher leaders under Section 25.30 of this Part; and

3) hold master's degrees in teacher leadership.

b) Section 21-5e provides that a candidate for administrative certification who is eligible under subsection (a) of this Section shall complete a 15-semester-hour approved course of study leading to competencies for organizational management and development, finance, supervision and evaluation, policy and legal issues.
and leadership. Proposals for the establishment of courses of study for this purpose shall be approved if they meet the requirements of subsection (c) of this Section. In making this determination, the State Board of Education shall consult with the State Teacher Certification Board. Proposals shall be addressed as required under Section 25.313(c) of this Part.

c) Each proposal shall describe the proposed course of study and demonstrate how candidates will acquire knowledge and skills equivalent to those addressed in a preparation program approved pursuant to Subpart C of this Part with respect to the standards described at:

1) 23 Ill. Adm. Code 29.100(c); and

2) 23 Ill. Adm. Code 29.120(a), (c), (d), and (f).

d) Section 21-5e also provides that an eligible candidate shall pass the "Illinois Administrator Assessment". For purposes of this Section, the test identified as "General Administrative" in Section 25.710 of this Part is the "Illinois Administrator Assessment", and the general administrative endorsement shall be affixed to the certificate earned pursuant to this Section.

e) Each alternative program established pursuant to this Section shall be subject to the Accreditation Review described in Subpart C of this Part.

f) Institutions of higher education conducting programs approved pursuant to this Section shall provide annual reports to the State Teacher Certification Board that describe the programs offered, the number of candidates who apply to each program, the completion rate for each program, and data regarding placement of individuals who complete each program.

(Source: Added at 31 Ill. Reg. 10645, effective July 16, 2007)

Section 25.335 General Administrative Endorsement (2004)

This endorsement is required for principals, assistant principals, assistant or associate superintendents, and staff filling other similar or related positions as indicated in 23 Ill. Adm. Code 1.7051, Appendix B. (See also 23 Ill. Adm. Code 29.120.) The requirements of this Section shall apply to the issuance of this endorsement, except as otherwise provided in Sections 21-5d and 21-5e of the School Code [105 ILCS 5/21-5d and 21-5e] and Sections 25.313 and 25.314 of this Part.
a) Each candidate for the general administrative endorsement shall hold a master's degree awarded by a regionally accredited institution of higher education and shall have completed the coursework in educational administration and supervision required by Section 21-7.1(e)(2) of the School Code [105 ILCS 5/21-7.1(e)(2)].

b) Each candidate shall have completed an Illinois program approved for the preparation of administrators pursuant to Subpart C of this Part or a comparable approved program in another state or country or hold a comparable certificate issued by another state or country (see Section 25.425 of this Part).

c) Each candidate shall have two years' full-time teaching or school service personnel experience in public schools, schools under the supervision of the Department of Corrections, schools under the administration of the Department of Human Services, or nonpublic schools recognized by the State Board of Education or meeting comparable out-of-state recognition standards (Section 21-7.1(e)(2) of the School Code).

d) Each candidate shall be required to pass the applicable content-area test (see Section 25.710 of this Part), as well as the test of basic skills if its passage would be required for receipt of a standard certificate pursuant to Section 25.720(a) of this Part.

e) Nothing in this Section is intended to preclude the issuance of a provisional certificate under Section 21-10 of the School Code.

(Source: Amended at 31 Ill. Reg. 10645, effective July 16, 2007)

SUBPART H: CLINICAL EXPERIENCES

Section 25.620 Student Teaching

a) The State Teacher Certification Board recognizes and accepts student teaching only when it is earned after completion of the sophomore year.

b) Student teaching shall be structured as part of comprehensive field experiences and clinical practice, as a supervised part of a teacher preparation program approved pursuant to Subpart C of this Part, and in accordance with the standards referred to in Section 25.115(b) of this Part.
c) Student teaching shall be completed at the grade level(s) and in the area of specialization appropriate to the certificate sought. Additional student teaching may occur in areas for which the candidate meets the relevant requirements related to staff qualifications in 23 Ill. Adm. Code 1.

d) Student teaching must be done under the active supervision of a cooperating teacher who is certificated and qualified to teach in the area and who is directly engaged in teaching subject matter or conducting learning activities in the area of student teaching, unless the student teacher:

1) is serving on a transitional bilingual certificate, a provisional vocational certificate, or a temporary provisional vocational certificate; or

2) is working in a school that is not legally required to employ certified teachers and either has two years' teaching experience at that school or presents to the employer the evidence described in Section 25.11(g) of this Part documenting that he or she has two years' teaching experience in one or more other schools exclusive of home schools; or

3) holds a substitute certificate and is not subject to the limitations of Section 21-9 of the School Code [105 ILCS 5/21-9].

e) In order for a recognized Illinois teacher education institution to award credit for student teaching, the following requirements must be met:

1) The student teacher must be enrolled in a student teaching course at the institution;

2) The student teaching placement and plans must have the prior approval of a designated representative of the teacher education institution; and

3) Plans for the student teaching experience must have been previously discussed and approved by the cooperating teacher if the involvement of such a teacher is required pursuant to subsection (d) of this Section.

f) An individual may receive credit for student teaching or pre-student teaching clinical experiences that are completed during the time for which the individual is paid as a teacher, unless the individual:
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1) holds no certificate issued pursuant to the School Code [105 ILCS 5], and performs the student teaching or pre-student teaching clinical experiences in a school district, and is not subject to the authorization for payment stated in Section 25(g) of the Grow Your Own Teacher Education Act [110 ILCS 48/25(g)] or Section 21-2.1 of the School Code [105 ILCS 5/21-2.1]; or

2) holds only a substitute certificate and is subject to the limitations of Section 21-9 of the School Code.

(Source: Amended at 31 Ill. Reg. 10645, effective July 16, 2007)

SUBPART I: ILLINOIS CERTIFICATION TESTING SYSTEM

Section 25.750 Conditions of Testing

a) On the day of the test, each person shall present the admission ticket received following test registration and two pieces of positive identification, one of which shall include a photograph taken within the last four years. Positive identification includes, but is not limited to, a driver's license, student identification card, Illinois identification card, passport, employee identification card, Social Security card, birth certificate, or selective service registration card. Any person lacking sufficient identification will be required to sign a declaration of identity statement. Any person lacking sufficient identification and refusing to sign a declaration of identity statement will be refused admission.

b) Persons arriving more than 30 minutes after a test administration has begun will be refused admission. Persons arriving within 30 minutes after a test administration has begun will be required to sign an acknowledgment of late arrival specifying that no additional time will be allotted beyond that already given to the other examinees for the session.

c) Beginning September 1, 2007, each person shall be required to provide a right thumbprint in a designated area on the personalized answer document in order to be admitted to the test site, except that a person who is unable to provide a right thumbprint due to a physical condition shall be admitted if he or she provides a print of the left thumb or, if unable to provide a left thumbprint, a print of another finger. The test proctor shall indicate which finger was used, if other than the right thumb. Any person refusing to provide a thumbprint or other fingerprint in accordance with this subsection (c) shall be refused admission.
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d) No refund of fees will be made to any person refused admission under subsection (a), (b), or (c) of this Section.

d) Each person admitted to a testing site shall abide by the instructions of the proctors administering the test in all matters relating to the test, including but not limited to seating arrangements and security measures. Each person authorizes the proctors to serve as his or her agents in maintaining a secure test administration.

fe) Each person beginning a test shall take every section of that test. The score of a person not completing all sections of a test will be reported as set forth in Sections 25.765 and 25.775 of this Part, unless such person requests voiding of that score as provided in Section 25.755 of this Part.

gf) No refund will be made to any person requesting that his or her score be voided, nor will credit be given toward the fee for any future test.

hg) No person may:

1) use written notes during a test;

2) make notes or copies of the contents of a test booklet;

3) use scratch paper;

4) bring into the testing site or use any mechanical or electronic device, except as expressly permitted in the registration materials (i.e., use of a nonprogrammable, solar or battery-powered calculator during the chemistry, mathematics, and physics subject matter tests);

5) bring into the testing site or use any communications device (e.g., telephone, pager) or communicate in any way with other examinees or any person other than the proctors during a test session;

6) remove any test materials from the testing site;

7) engage in behavior that disrupts or gives unfair advantage or disadvantage to other examinees;

8) fail to sign the document(s) on which he or she is directed to record his or
An individual who wishes to object to any of the testing conditions or procedures set forth in this Section shall notify the testing contractor in writing of the basis for this objection no later than six weeks prior to the test administration date. An individual who wishes to object shall not register using the late or emergency registration procedures described in Sections 25.732 and 25.733 of this Part.

1) The testing contractor shall inform the registrant as to whether his or her objection will be honored.

2) If an individual's objection is not honored, the testing contractor shall inform the individual that he or she will not be registered for the test administration.

3) An individual who objects to a condition of testing after using late or emergency registration procedures may be prohibited from taking the test, or his or her score may be voided.

(Source: Amended at 31 Ill. Reg. 10645, effective July 16, 2007)

Section 25.755 Voiding of Scores

a) A person shall have the right to void his/her test score(s). Such a request must be submitted in writing and received by the State Board of Education within seven calendar days after the date of the test.

b) A person's score(s) will be voided by the State Board of Education due to violation by the person of any of the conditions of testing enumerated in Section 25.750(d) and (g) of this Part.

c) The Illinois State Board of Education will also void any affected test score if:

1) any person taking the test engages in any form of misconduct, including but not limited to the actions listed in Section 25.750(g), having the purpose or effect of:
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A) giving any person taking the test an unfair advantage over other examinees,

B) affecting, either positively or negatively, the performance of any person taking the test, or

C) representing the performance of the named registered examinee by the performance of another person;

2) there is any testing irregularity that calls into question:

A) the accuracy of the test scores as measures of the actual performances of the examinees, or

B) the validity of the test scores as measures of the performances of the examinees in light of the conditions and circumstances under which the test was administered.

d) The State Board of Education shall notify the person of such action taken within six weeks after the test date. If any person's test materials reveal irregularities that warrant further investigation, the State Board shall forward those materials, including the person's thumbprint, to the appropriate law enforcement authority and shall notify the affected person(s) within ten days after taking such action. The State Board of Education may require the person to provide a thumbprint to the appropriate law enforcement authority for comparison with that provided on the personalized answer document and may void the test score earned by a person who refuses to do so.

e) No refund will be given to any person whose score is voided.

f) If a score is voided for any reason, it will not be reported or entered on any records. All records of the person's test responses, including but not limited to answer sheets and electronic media records, will be destroyed and will be irretrievable. Voiding of an individual's score shall not limit his or her right to retake the test. However, in some instances scores are voided for reasons that render individuals ineligible for certification in Illinois, regardless of any future testing. See Section 21-1 of the School Code [105 ILCS 5/21-1]. In those instances, records of the individuals' test responses may be maintained by the testing contractor and by ISBE.
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for further investigation. In all other cases, records of the person's test responses, including but not limited to answer sheets and electronic media records, will be destroyed and will be irretrievable.

(Source: Amended at 31 Ill. Reg. 10645, effective July 16, 2007)
1) **Heading of the Part**: Secular Textbook Loan

2) **Code Citation**: 23 Ill. Adm. Code 350

3) **Section Number**: Adopted Action: 350.15 Amendment

4) **Statutory Authority**: 105 ILCS 5/18-17

5) **Effective Date of Amendment**: July 16, 2007

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

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

8) A copy of the adopted amendment, including any 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**: April 6, 2007; 31 Ill. Reg. 5489

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

11) **Differences between proposal and final version**: None

12) **Have all the changes agreed upon by the agency and JCAR been made as indicated in the agreements issued by JCAR?** No changes were requested by JCAR, and no agreement letter was issued.

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

14) **Are there any other proposed rulemakings pending on this Part?** No

15) **Summary and Purpose of Amendment**: This rulemaking responds to Public Act 94-927, which was enacted in 2006 and made a change in the textbook loan program. Section 18-17 of the School Code was amended to state that bonding requirements under Sections 28-1 and 28-2 of the School Code are not applicable to vendors in this program. This statutory change necessitated a corresponding revision to Section 350.15 of our rules, which has referred to the bonding requirement.
STATE BOARD OF EDUCATION

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16) Information and questions regarding this adopted amendment shall be directed to:

Melissa Oller
Fiscal Services Division
Illinois State Board of Education
100 North First Street
Springfield, Illinois 62777-0001

217/785-8777

The full text of the Adopted Amendment begins on the next page:
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NOTICE OF ADOPTED AMENDMENT

TITLE 23: EDUCATION AND CULTURAL RESOURCES
SUBTITLE A: EDUCATION
CHAPTER I: STATE BOARD OF EDUCATION
SUBCHAPTER j: TEXTBOOKS

PART 350
SECULAR TEXTBOOK LOAN

Section
350.10 Definition of Terms
350.15 Acquisition Procedures
350.20 Administrative Practices (Repealed)
350.25 Disposal Procedures
350.30 Fiscal Procedures (Repealed)

AUTHORITY: Implementing and authorized by Section 18-17 of the School Code [105 ILCS 5/18-17].


Section 350.15 Acquisition Procedures

a) Students shall not be assessed a fee for any textbook or book substitute provided under the Secular Textbook Loan Program.

b) Eligible applicants shall provide parents with a brief written explanation of the textbook loan program and the process for a parent/guardian or student to request the loan of a secular textbook in a student handbook, newsletter or flyer or by similar means. A parent/guardian or student may request the loan of a secular textbook(s) by submitting an individual request (see Section 18-17 of the School Code). School districts shall develop procedures for taking a request from a parent/guardian or student.
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c) Requested textbooks shall be those that have been adopted for use in the district or school and that are available from those vendors participating in the program that have presented evidence to the State Board of Education of being bonded and meeting the other requirements of Section 28-1 of the School Code [105 ILCS 5/28-1]. The State Board of Education each fiscal year shall provide on its textbook loan website the list of participating vendors from which materials may be purchased and the list of secular textbooks that the State Board of Education has identified as eligible under the program.

d) By the end of November of each year, the State Board of Education will identify the grade levels to be funded and calculate the per-pupil allocation. Those school administrators with schools eligible to participate will be notified in writing as to:

1) the total amount available to their students to be used for the grade levels identified for funding (the per-pupil allocation will be based upon the total amount of funds appropriated for the program and the total statewide public and nonpublic school enrollment in the specific grade levels to be funded, as of the last school day in September of the current school year); and

2) the password to be used to access the textbook loan website for the purposes of completing a Request Form.

e) The Request Forms shall be completed by the school administrator. Electronic submission of the Request Form shall certify compliance with Section 18-17 of the School Code and this Part, as well as with Article X, Section 3, of the Illinois Constitution, which provides in pertinent part that no funds may be used to help support or sustain any institution controlled by any church or sectarian denomination.

f) Each eligible applicant shall submit its completed Request Form on or before March 15. Eligible applicants will be unable to access the Request Form after this deadline.

g) Each school administrator shall be informed via U.S. mail by April 15 as to the specific textbooks that will be purchased.

h) On a form provided by the State Board of Education, the school administrator shall confirm that the quantity and titles of all textbooks received are the same as
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ordered. Such confirmation shall be mailed or faxed to the State Board of Education, using the address or fax number provided on the form, within seven days after receipt of the textbooks.

i) All textbooks provided through the program shall be listed on an inventory maintained by the State Board of Education. Each school shall identify (stamp) the materials received under the program as "Property of the State of Illinois, School Year__".

j) Each recipient shall have procedures to assure the return of all textbooks from those to whom they have been loaned.

(Source: Amended at 31 Ill. Reg. 10668, effective July 16, 2007)
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1) **Heading of the Part**: Children's Mental Health Initiative Grants

2) **Code Citation**: 23 Ill. Adm. Code 555

3) **Section Numbers**: Adopted Action:
   - 555.10 New Section
   - 555.20 New Section
   - 555.30 New Section
   - 555.40 New Section
   - 555.50 New Section
   - 555.60 New Section
   - 555.110 New Section
   - 555.120 New Section
   - 555.130 New Section
   - 555.135 New Section
   - 555.140 New Section
   - 555.150 New Section
   - 555.155 New Section
   - 555.160 New Section
   - 555.APPENDIX A New Section

4) **Statutory Authority**: 105 ILCS 5/2-3.6

5) **Effective Date of Rules**: July 16, 2007

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**: April 6, 2007; 31 Ill. Reg. 5494

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

11) **Differences between proposal and final version**: In Section 555.30(a)(1), explicit mention of referral and follow-up was added, while the reference to screening was deleted.
The reservation of portions of these grant funds for the Chicago Public Schools and for small districts was revised to be stated as an intention rather than in absolute terms and to discuss small districts as 25 percent of recipients rather than as recipients of 25 percent of the available funds.

The title of the planning grants discussed in Subpart B of these rules was changed to "Planning and Training Grants". In addition, the two-year plan to be developed with these grants was changed to a three-year plan, extending beyond the end of grant funding in order to promote sustainability of this effort.

The prohibition on the use of funds under Subpart B of these rules (Grants for Implementation of Social and Emotional Learning Standards) to pay the salaries of district personnel was changed so that salaries will be an allowable expenditure when districts are involving at least six schools in these projects.

Section 555.135 was revised to make receipt of a planning and training grant a prerequisite to eligibility for implementation funding. Several related provisions were edited in keeping with this new requirement. Additionally, language was added to provide that districts other than the Chicago Public Schools must complete an entire planning and implementation cycle before becoming eligible for additional funding for additional schools. Districts that have not yet participated at all will be given priority over other applicants.

The emphasis given to need and readiness in the review of planning and training grant proposals was reversed; the discussion of need was revised to incorporate various risk factors that students might experience; and the discussion of readiness was amplified with additional criteria. The criteria for review of implementation proposals were also strengthened with a reference to measurable goals and objectives.

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 rulemaking currently in effect? No

14) Are there any other proposed rulemakings pending on this Part? No

15) Summary and Purpose of Rules: The State Board of Education received an appropriation of $3 million in the FY 07 budget for the Children's Mental Health Partnership. During
that year, through close collaboration with the members of that partnership and particularly the Illinois Violence Prevention Authority (IVPA), strategies were formulated for the involvement of the public schools in initiatives aimed at fostering mental health for students as well as their mastery of the recently adopted Social and Emotional Learning (SEL) Standards. While much of the FY 07 appropriation was expended under an intergovernmental agreement with the IVPA, the plan for the future involves ISBE's issuance of competitive grants to school districts under two distinct programs. New Part 555 describes the intended focus of the "School Mental Health Support Grants" and the "Grants for Implementation of Social and Emotional Learning Standards". The Board's budget proposal for FY 08 includes $6 million for these grants and related purposes. The rules have been developed so that the agency will be prepared to fund these grants if ongoing appropriations are made.

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

   Jodi Fleck
   Special Education Services
   Illinois State Board of Education
   100 North First Street
   Springfield, Illinois 62777-0001

   217/782-5589

The full text of the Adopted Rules begins on the next page:
PART 555
CHILDREN'S MENTAL HEALTH INITIATIVE GRANTS

SUBPART A: SCHOOL MENTAL HEALTH SUPPORT GRANTS

Section
555.10 Purpose and Applicability
555.20 Eligible Applicants
555.30 Program Specifications
555.40 Application Procedure
555.50 Criteria for the Review of Initial Proposals
555.60 Allocation of Funds

SUBPART B: GRANTS FOR IMPLEMENTATION OF SOCIAL AND EMOTIONAL LEARNING STANDARDS

Section
555.110 Purpose and Applicability
555.120 Eligible Applicants
555.130 Program Specifications – Planning and Training Grants
555.135 Program Specifications – Implementation Grants
555.140 Application Procedure
555.150 Criteria for the Review of Planning and Training Grant Proposals
555.155 Criteria for the Review of Implementation Grant Proposals
555.160 Allocation of Funds

555.APPENDIX A Social and Emotional Learning Standards

AUTHORITY: Implementing Section 15 of the Children's Mental Health Act of 2003 [405 ILCS 49/15] and authorized by Section 2-3.6 of the School Code [105 ILCS 5/2-3.6].


SUBPART A: SCHOOL MENTAL HEALTH SUPPORT GRANTS
Section 555.10 Purpose and Applicability

This Subpart A establishes the application procedure and criteria for selection by the State Superintendent of Education of the entities that will receive grant funds for programs designed to support students' mental health by:

a) enhancing the recipients' capacity to identify and meet students' needs for early, coordinated mental health intervention services in "natural" settings;

b) contributing to the development of a mental health support system for students that is integrated with community mental health agencies and other agencies and systems that serve children; and

c) reducing the stigma associated with mental health and mental illness within the school community.

Section 555.20 Eligible Applicants

Eligible applicants shall be school districts, public university laboratory schools approved by the State Board of Education pursuant to Section 18-8.05(K) of the School Code [105 ILCS 5/18-8.05(K)], charter schools, and area vocational centers. For purposes of this Part, the terms "applicant" and "district" shall be understood to include all these eligible entities.

a) Joint applications for funds may be submitted by any combination of eligible applicants, provided that one of the participants shall be designated to serve as administrative agent.

b) No applicant shall participate in more than one proposal under this Subpart A.

Section 555.30 Program Specifications

a) In order to achieve the goals specified in Section 555.10 of this Part, each proposed project shall include objectives and activities related to:

1) Developing a protocol and structures for meeting the early intervention mental health needs of students, including identifying, referring, and following up on those who could benefit from early intervention,
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involving parents and other care-givers, and planning for and providing services from qualified mental health professionals, such as:

A) assessment,
B) individual and group counseling,
C) family support, and
D) school-wide mental health awareness activities;

2) Coordinating services with those offered by other community-based service systems and providers by:

A) developing a framework for the integration of social and emotional learning and mental health-related initiatives based on a team approach that includes school staff, community-based providers, students, and their families to build upon existing mental health structures,
B) implementing formal interagency working agreements, and
C) providing services in "natural" settings such as schools, youth-serving agencies, or family homes; and

3) Reducing the mental health stigma within the school community by:

A) conducting events for the school faculty, students, and family members to increase awareness regarding the impact of mental illness, the efficacy of mental health treatment, and the importance of early identification,
B) addressing mental health stigmas that are specific to particular cultures or segments of the community, and
C) promoting leadership among students and support for peers with regard to issues of mental health.
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b) Each proposed project shall make services available to all students housed in any attendance center for which funding is provided under this Subpart A.

Section 555.40 Application Procedure

For purposes of this Part, the terms "proposal" and "application" shall have the same meaning.

a) When State funding is available for grants under this Subpart A, the State Superintendent of Education shall issue a Request for Proposals (RFP) in order to solicit applications from eligible entities.

b) The RFP shall describe the format that applicants will be required to follow and the information they will be required to submit, including, but not limited to, descriptive information about the district, demographic information about the student population, identification of the specific schools that will be served and their needs, a plan of work for the project, an evaluation plan, and information about any related efforts that have already been undertaken.

c) The RFP shall indicate the amount or expected amount of the appropriation for the program and shall describe the allowable expenditures and the basis for awarding grants.

d) The RFP shall require completion of a budget summary and payment schedule as well as a narrative budget breakdown, i.e., a detailed explanation of each line item of expenditure.

e) The RFP shall identify the data recipients will be required to collect and report regarding the activities conducted with grant funds and the results of those activities, as well as the timelines for reporting and any required participation in technical assistance activities.

f) The RFP shall include certification and assurance forms that the State Superintendent may require.

g) The RFP shall specify the deadline for submission of proposals, which shall provide potential applicants with at least 30 days to respond.

h) Separate applications shall be required for renewal of grant funding. Each application for renewal shall include at least:
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1) a description of expenditures and activities during the year just concluded, demonstrating that the project has been implemented in conformance with the approved grant agreement and that the recipient continues to exhibit a need for grant funds for this purpose; and

2) an updated budget summary and payment schedule for the renewal year, including a narrative budget breakdown.

i) Incomplete proposals shall not be considered.

Section 555.50 Criteria for the Review of Initial Proposals

a) Applications for initial funding shall be evaluated in accordance with the following criteria:

1) Project Implementation and Management (50 points)

A) The proposed project is likely to result in a student mental health support system that will assist the district in identifying and meeting the mental health needs of students through collaboration with other community agencies that serve children and address mental health issues.

B) The proposed amount of time for services is appropriate for the number of students likely to be served, and the staff and partnerships to be dedicated to this initiative have the capacity to provide this level of service.

C) The proposed objectives and timelines for conducting the activities of the project, including those of any subcontractors, adequately match the project's goals.

2) Need (35 points)

The applicant has a significant need for the grant that cannot be met through use of existing resources, as evidenced by data that substantiate:

A) the level and nature of need among members of the student population; and
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B) the district's need for additional resources to address gaps in school mental health services.

3) Cost-Effectiveness (15 points)
   The proposed budget is cost-effective, as evidenced by the cost of the proposed activities in relation to the numbers to be served and the services to be provided. The criteria used in selecting schools for participation will contribute to achieving the widest possible impact.

   b) Among proposals that receive substantially equal rankings, priority will be given to districts in which more than 50 percent of the students are eligible for free or reduced-price lunches.

Section 555.60 Allocation of Funds

a) It is expected that 20 percent of the funds available for this program will be allocated to the Chicago Public Schools and that approximately 25 percent of grant recipients will be districts that either operate only one school or enroll no more than 1,000 students. The State Superintendent of Education shall approve initial applications and make final determinations regarding the amounts to be provided based upon the total funds appropriated for this initiative, the allocation approach as provided in this subsection (a), the amounts necessary to fund the top-ranked proposals, and the need to distribute the benefits of support for students' mental health on a statewide basis and among districts of various types.

b) It is the intention of the State Board of Education to approve funding for projects under this Subpart A for a three-year period. Funding for the second and third years shall be contingent upon the availability of funds for the program and evidence presented in renewal proposals that the projects have been implemented in accordance with the approved grant agreements and that the recipients continue to need additional State resources in order to meet their students' mental health needs effectively.

c) A district that has received three years' funding under this Subpart A may subsequently apply as a new applicant.

SUBPART B: GRANTS FOR IMPLEMENTATION OF SOCIAL AND EMOTIONAL LEARNING STANDARDS
Section 555.110 Purpose and Applicability

This Subpart B establishes the application procedure and criteria for selection by the State Superintendent of Education of the entities that will receive grant funds for activities associated with implementing the social and emotional learning standards set forth in Appendix A to this Part, including participation in relevant training and technical assistance.

Section 555.120 Eligible Applicants

Eligible applicants for planning and training grants under this Subpart B shall be those identified in Section 555.20 of this Part, and joint applications shall be permitted as stated in that Section. Eligibility for implementation grants under this Subpart B shall be limited to entities that have received planning and training grants for the respective prior school year and successfully completed those activities in accordance with the approved grant agreements.

Section 555.130 Program Specifications – Planning and Training Grants

The goal of each planning and training grant project under this Subpart B shall be the development of a three-year plan for implementation of the social and emotional learning (SEL) standards set forth in Appendix A to this Part, as applicable to the grade levels of the participating schools.

a) Each participating school shall be required to establish an implementation team consisting of at least a school administrator, a teacher, and a representative of the families whose children attend the school. Activities to be conducted with planning and training grant funds shall include, but need not be limited to:

1) participation by each school's implementation team in training and technical assistance activities made available by the regionally based training entity designated by the State Superintendent of Education;

2) conducting at least two family education sessions relating to the social and emotional learning standards;

3) identifying gaps in available resources and services related to social and emotional learning; and
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4) preparation of a plan setting forth a specific, three-year sequence of steps for moving toward the comprehensive integration of the social and emotional learning standards into the participating schools' educational programs, school environment, and other mental health supports.

b) Each proposed planning and training project shall encompass all students housed in any attendance center for which funding is provided.

c) No more than five percent of the grant funds may be used for general administrative expenses. Stipends for extra work or time on the part of district employees, as well as necessary costs for substitute teachers, shall be allowable expenses. Grant funds may be used to pay the salaries of district personnel only when at least six schools in a district are participating in planning and training projects under this Subpart B.

Section 555.135 Program Specifications – Implementation Grants

Implementation grant funds provided under this Subpart B shall be used for the purpose of integrating the SEL standards into the participating schools' curricula and programs.

a) Grant funds shall be used only to defray costs associated with the time-specific, measurable steps outlined in the recipient's plan (e.g., working to identify specific additions and modifications that will be made to particular aspects of schools' services or curricula, assigning responsibility for the accomplishment of those modifications, and ensuring that responsible staff receive any necessary professional development in order to deliver the curriculum and address the standards effectively). The use of grant funds to pay the salaries of district personnel shall be limited as provided in Section 555.130(c) of this Part.

b) Each implementation project shall encompass all students housed in any attendance center for which funding is provided.

c) A district that has received two years' implementation funding under this Subpart B shall be eligible to submit a planning and training grant proposal as a new applicant in a subsequent year, provided that:

1) the applicant, if other than a district organized under Article 34 of the School Code [105 ILCS 5/Art. 34], has successfully completed the entire previous grant cycle; and
2) the new project will involve only schools not already served under a project previously funded.

Section 555.140 Application Procedure

The provisions of Section 555.40 of this Part shall apply to grants under this Subpart B.

Section 555.150 Criteria for the Review of Planning and Training Grant Proposals

a) Applications for funding shall be evaluated in accordance with the following criteria:

1) Need (50 points)
   The proposal demonstrates that:

   A) the applicant serves a significant number of students who are subject to risk factors, such as financial need, absence or unemployment of a parent, chronic illness, or homelessness, that may jeopardize their social and emotional well-being; and

   B) gaps in current programs and systems have resulted in inadequate or uneven attention to the social and emotional learning needs of the students housed in the participating schools; and

   C) the applicant needs additional resources to prepare for the integration of the SEL standards into the participating schools' curricula and programs.

2) Readiness (40 points)

   A) The proposal presents a defensible rationale for the selection and number of schools to be served and demonstrates that the applicant's choice of members for the Implementation Teams will make efficient use of any prior involvement in SEL-related activities.

   B) The proposed sequence of activities reflects the applicant's policy adopted under Section 15 of the Children's Mental Health Act of
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2003 [405 ILCS 49/15], as well as an appropriate relationship between the professional development to be provided to participants and the planning activities that will occur.

C) The proposal demonstrates an allocation of district resources and administrative effort that will be sufficient for the management of the grant activities, commensurate with the district's ability to contribute, and indicative of engagement in the project on the part of the district's leadership.

3) Cost-Effectiveness (10 points)
   The proposed budget is cost-effective, as evidenced by the cost of proposed activities in relation to the numbers of individuals participating in the planning effort and the quantity of schools involved.

b) The provisions of Section 555.50(b) of this Part shall apply to the distribution and ranking of proposals under this Subpart B.

Section 555.155 Criteria for the Review of Implementation Grant Proposals

a) Applications for funding shall be evaluated in accordance with the following criteria:

1) Quality of the Plan (65 points)
   A) The proposal demonstrates that strategies and activities for integrating the SEL standards were selected with specific reference to the applicant's assessment of available resources and school-wide needs.

   B) The proposed three-year plan sets forth measurable goals and objectives and is likely to result in significant progress toward the complete integration of the SEL standards into the schools' curricula and programs and to assist students in achieving those goals and standards.

   C) The school staff members who will be involved with the integration of the SEL standards have the professional development and capacity to implement the plan.
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2) Need (25 points)
   The proposal demonstrates that:

   A) the applicant serves a significant number of students whose family
      backgrounds or socio-economic situations may not adequately
      foster their social and emotional well-being; and

   B) gaps in current programs and systems have resulted in inadequate
      or uneven attention to the social and emotional learning needs of
      the students housed in the participating schools; and

   C) the applicant needs additional resources for the integration of the
      SEL standards into the participating schools' curricula and
      programs.

3) Cost-Effectiveness (10 points)
   The proposed budget is cost-effective, as evidenced by the cost of
   proposed activities in relation to the numbers to be served and the services
   to be provided.

   b) The provisions of Section 555.50(b) and (c) of this Part shall apply to the
      distribution and ranking of proposals under this Subpart B.

Section 555.160 Allocation of Funds

a) The provisions of Section 555.60(a) of this Part shall apply to the allocation of
   funds under this Subpart B.

b) It is the intention of the State Board of Education to approve projects under this
   Subpart B for a three-year period, in which the first year is devoted to planning
   and training and the second and third years are devoted to implementation of the
   plan. Proposals for new projects from districts that have already completed a
   grant cycle under this program shall be funded only if sufficient funds remain
   available after awards are made for all approvable applications from districts that
   have not yet participated, provided that this limitation shall not apply to a school
   district organized under Article 34 of the School Code.
Section 555. APPENDIX A  Social and Emotional Learning Standards

Goal 1: Develop self-awareness and self-management skills to achieve school and life success.

   Learning Standard A: Identify and manage one's emotions and behavior.
   Learning Standard B: Recognize personal qualities and external supports.
   Learning Standard C: Demonstrate skills related to achieving personal and academic goals.

Goal 2: Use social awareness and interpersonal skills to establish and maintain positive relationships.

   Learning Standard A: Recognize the feelings and perspectives of others.
   Learning Standard B: Recognize individual and group similarities and differences.
   Learning Standard C: Use communication and social skills to interact effectively with others.
   Learning Standard D: Demonstrate an ability to prevent, manage, and resolve interpersonal conflicts in constructive ways.

Goal 3: Demonstrate decision-making skills and responsible behaviors in personal, school, and community contexts.

   Learning Standard A: Consider ethical, safety, and societal factors in making decisions.
   Learning Standard B: Apply decision-making skills to deal responsibly with daily academic and social situations.
   Learning Standard C: Contribute to the well-being of one's school and community.
TEACHERS' RETIREMENT SYSTEM OF THE STATE OF ILLINOIS

NOTICE OF ADOPTED AMENDMENTS

1) **Heading of the Part:** The Administration and Operation of the Teachers' Retirement System

2) **Code Citation:** 80 Ill. Adm. Code 1650

3) **Section Numbers:**
   - Adopted Action:
     - 1650.320  Amended
     - 1650.485  New
     - 1650.1205 Amended

4) **Statutory Authority:** Implementing and authorized by Article 16 of the Illinois Pension Code [40 ILCS 5/16]

5) **Effective Date of Amendments:** July 13, 2007

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 Teachers' Retirement System's principal office and is available for public inspection.

9) **Notice of Proposal Published in Illinois Register:** February 9, 2007; 31 Ill. Reg. 2618

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

11) **Differences between proposal and final version:** Various punctuation changes recommended by JCAR were made in the final version.

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

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

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

15) **Summary and Purpose of Amendments:** Section 1650.320 creates a new category of creditable service to allow TRS employers to temporarily absent an employee from his or
her position to investigate allegations of wrong-doing and for the member to receive regular service credit if the allegations later are determined to be unfounded. Section 1650.485 establishes the first of the month as the billing date for the 30 day dispute and 90 day interest grace period for purposes of 40 ILCS 5/16-158(f). Section 1650.1205 corrects typographical errors in the text.

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

    Thomas S. Gray, General Counsel
    Teachers’ Retirement System
    2815 West Washington, P.O. Box 19253
    Springfield, Illinois  62794-9253

    217/753-0375

The full text of the Adopted Amendments begins on the next page:
TEACHERS' RETIREMENT SYSTEM OF THE STATE OF ILLINOIS

NOTICE OF ADOPTED AMENDMENTS

TITLE 80: PUBLIC OFFICIALS AND EMPLOYEES
SUBTITLE D: RETIREMENT SYSTEMS
CHAPTER III: TEACHERS' RETIREMENT SYSTEM OF THE STATE OF ILLINOIS

PART 1650
THE ADMINISTRATION AND OPERATION OF THE TEACHERS' RETIREMENT SYSTEM

SUBPART A: REPORTS BY BOARD OF TRUSTEES

Section
1650.10 Annual Financial Report (Repealed)

SUBPART B: BASIC RECORDS AND ACCOUNTS

Section
1650.110 Membership Records
1650.120 Claims Records (Repealed)
1650.130 Individual Accounts (Repealed)
1650.140 Ledger and Accounts Books (Repealed)
1650.150 Statistics (Repealed)
1650.160 Confidentiality of Records
1650.180 Filing and Payment Requirements
1650.181 Early Retirement Incentive Payment Requirements
1650.182 Waiver of Additional Amounts Due
1650.183 Definition of Employer's Normal Cost

SUBPART C: FILING OF CLAIMS

Section
1650.201 Disability Benefits – Application Procedure
1650.202 Disability and Occupational Disability Benefits – Definitions
1650.203 Disability Retirement Annuity – Definitions
1650.204 Gainful Employment – Consequences
1650.205 Medical Examinations and Investigation of Disability Claims
1650.206 Physician Certificates
1650.207 Disability Due to Pregnancy
1650.208 Disability Payments
TEACHERS’ RETIREMENT SYSTEM OF THE STATE OF ILLINOIS

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1650.209 Computation of Annual Salary When Member Has Different Semester Salary Rates
1650.210 Claim Applications
1650.211 Disability Recipient Eligible to Receive an Age or Disability Retirement Annuity
1650.220 Reclassification of Disability Claim (Repealed)
1650.221 When Member Becomes Annuitant
1650.222 Death Out of Service
1650.230 Medical Examinations and Investigations of Claims (Repealed)
1650.240 Refunds; Impermissible Refunds; Canceled Service; Repayment
1650.250 Death Benefits
1650.260 Evidence of Age
1650.270 Reversionary Annuity – Evidence of Dependency
1650.271 Evidence of Parentage
1650.272 Eligible Child Dependent By Reason of a Physical or Mental Disability
1650.280 Evidence of Marriage
1650.290 Offsets

SUBPART D: MEMBERSHIP AND SERVICE CREDITS

Section
1650.301 Early Retirement Without Discount – Return to Teaching from a Break in Service
1650.310 Effective Date of Membership
1650.320 Method of Calculating Service Credits
1650.325 Method of Calculating Service Credit for Recipients of a Disability Benefit or Occupational Disability Benefit
1650.330 Duplicate Service Credit
1650.335 Unreported Regular Service Credit and Earnings
1650.340 Service Credit for Leaves of Absence
1650.341 Service Credit for Involuntary Layoffs
1650.345 Service Credit for Periods Away From Teaching Due to Pregnancy
1650.346 Service Credit for Periods Away From Teaching Due to Adoption
1650.350 Service Credit for Unused Accumulated Sick Leave Upon Retirement
1650.351 Employer Contribution for Excess Sick Leave
1650.355 Purchase of Optional Service – Required Minimum Payment
1650.356 Payroll Deduction Program (Repealed)
1650.357 Employer Payment of Member’s Optional Service and/or Upgrade Contribution Balance (Repealed)
1650.360 Settlement Agreements and Judgments
1650.370 Calculation of Average Salary (Renumbered)
TEACHERS' RETIREMENT SYSTEM OF THE STATE OF ILLINOIS

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Section
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AUTHORITY: Implementing and authorized by Articles 1 and 16 of the Illinois Pension Code [40 ILCS 5/Arts. 1 and 16]; Freedom of Information Act [5 ILCS 140]; Internal Revenue Code (26 USC 1 et seq.); Section 5-15 of the Illinois Administrative Procedure Act [5 ILCS 100/5-15].

 NOTICE OF ADOPTED AMENDMENTS


SUBPART D: MEMBERSHIP AND SERVICE CREDITS

Section 1650.320 Method of Calculating Service Credits

a) No more than one year's service credit shall be granted for total service rendered between July 1 of one year through June 30 of the following year.

b) If the service rendered on a full-time basis, substitute basis, or part-time basis after June 30, 1990 is less than 170 days between July 1 of one year through June 30 of the following year, then credit for service shall be at a ratio of the actual number of days of service to 170 days.

c) Service credit for service rendered on a permanent and continuous part-time basis prior to July 1, 1990, between July 1 of one year through June 30 of the following year, shall be at the ratio of creditable earnings to the annual salary rate. Provided, however, that for service after June 30, 1959, if such ratio equals or exceeds the ratio of 170 days to the days in the legal school term, one year of service credit shall be granted.

d) If service prior to July 1, 1990 is rendered partially on a full-time basis and partially on a permanent and continuous part-time basis between July 1 of one year through June 30 of the following year, then credit for service shall be at the ratio of creditable earnings to the annual salary rate. Provided, however, that for service after June 30, 1959, if such ratio equals or exceeds the ratio of 170 days to
TEACHERS' RETIREMENT SYSTEM OF THE STATE OF ILLINOIS

NOTICE OF ADOPTED AMENDMENTS

the days in the legal school term, one year of service credit shall be granted.

e) Whenever the actual number of days of service is unavailable because of lack of employer records, the number of days the System uses to grant service credit shall be equal to the actual number of hours for which the member was paid, divided by four.

f) Days of service shall include any weekday, Monday through Friday, for which periodic payment is made to the member for:

1) Service rendered which requires teacher certification under the School Code;

2) Attendance, during the work week, at teacher's institutes, workshops and parent/teacher conferences scheduled in the school calendar;

3) Legal school holidays;

4) Vacation, sick or personal leave days (except when such payment is for severance pay);

5) Sabbatical leaves meeting the requirements of Section 24-6.1 of the School Code [105 ILCS 5/24-6.1]; or

6) Suspension.

7) Administrative absence defined as an absence from duty administratively authorized for investigative purposes without the loss of pay and benefits and without charge to leave.

g) A day of service may be credited for Saturday service if such day would otherwise qualify as a day of service and the service was required due to a lawful day of attendance.

h) Days of service do not include days for which the member was paid while on a board-approved leave of absence. However, the member may be eligible to purchase optional service credit under the provisions of Section 1650.340.

(Source: Amended at 31 Ill. Reg. 10688, effective July 13, 2007)
SUBPART E: CONTRIBUTION CREDITS AND PAYMENTS

Section 1650.485  Employer Contributions for Salary Increases in Excess of 6% - Receipt of Bill

For purposes of determining the 30 day period to dispute the amount of a bill for an employer contribution for salary increases in excess of 6% and the 90 day interest grace period provided in 40 ILCS 5/16-158(f), an employer shall be deemed to have received a bill for employer contributions on the first day of the month following the bill date indicated on the bill.

(Source: Added at 31 Ill. Reg. 10688, effective July 13, 2007)

SUBPART N: PAYROLL DEDUCTION PROGRAM

Section 1650.1205  Employer Payment of Member's Optional Service, Refund and/or Upgrade Contribution Balance

a) Once per school year, an employer may make a payment toward a member's 2.2 upgrade, optional service and/or refund balance, provided the member has not commenced participation in a payroll deduction agreement to purchase the same service credit or upgrade, unless the authorization for the pick up is made by the employer prior to the date on which the payroll deduction agreement becomes irrevocable.

b) The employer contribution under this option may be picked up pursuant to section 414(h)(2) of the Internal Revenue Code of 1986, as amended (26 USC 414(h)(2)), or paid on an after-tax basis as certified by the employer.

c) The employer shall certify to the System whether the payment being made is done so on a tax-deferred or after-tax basis by completing and returning the appropriate form with the payment.

(Source: Amended at 31 Ill. Reg. 10688, effective July 13, 2007)
## Notice of Emergency Rules

1) **Heading of the Part:** Supplemental Reports for Accident and Health Insurers

2) **Code Citation:** 50 Ill. Adm. Code 937

3) **Section Numbers & Emergency Action:**

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<td>New Section</td>
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<tr>
<td>937.20</td>
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<td>937.EXHIBIT C</td>
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4) **Statutory Authority:** Implementing and authorized by Sections 136 and 401 of the Illinois Insurance Code [215 ILCS 5/136 and 401]

5) **Effective Date of Emergency Rules:** July 12, 2007

6) **If this emergency rule is to expire before the end of the 150-day period, please specify the date on which it is to expire:** No

7) **Date Filed with Index Department:** July 12, 2007

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

9) **Reason for Emergency:** It is apparent that health care and related costs have increased dramatically for insured, underinsured, and uninsured citizens of this State, threatening their physical and financial well being. Despite this fact, insurers authorized to transact the class of business as set forth in clause (b) of Class 1 and clause (a) of Class 2 of Section 4 of the Insurance Code [215 ILCS 5/4] do not report and are not required to report premium, loss, and enrollment data specific to particular lines of accident and health insurance business.

This Part responds to the threat facing insured, underinsured, and uninsured Illinoisans. Because the reported data will allow for an urgently needed evaluation of health insurance costs and the overall health insurance marketplace and because the reported
data is central to the evaluation of Illinois citizens' access to health insurance and health care, the health insurance industry must provide this data immediately upon the next reporting cycle.

10) **A Complete Description of the Subjects and Issues Involved:** This new Part establishes for all companies writing accident and health insurance a report requirement that is supplemental to the Annual Report requirement established by Section 136 of the Illinois Insurance Code. The supplemental report will require companies writing accident and health insurance to report more detailed information about premium earned, losses incurred, enrollment, premium discounts provided for participation in wellness programs, and average reimbursement rates paid to providers.

11) **Are there any proposed rulemakings to this Part pending?** No

12) **Statement of Statewide Policy Objective:** This Part will not require a local government to establish, expand or modify its activities in such a way as to necessitate additional expenditures from local revenues.

13) **Information and questions regarding this Part shall be directed to:**

James G. Jordan, Staff Attorney
Department of Financial and Professional Regulation
Division of Insurance
100 West Randolph St., Suite 9-301 or 3rd Floor
Chicago, Illinois 60601-3251
312/814-5410

Craig Cellini, Rules Coordinator
Department of Financial and Professional Regulation
320 West Washington
Springfield, Illinois 62767-0001
217/785-0810

The full text of the Emergency Rules begins on the next page:
Section 937.10  Purpose
EMERGENCY

The purpose of this Part is to establish supplemental reporting requirements for insurers authorized to transact the class of business as set forth in clause (b) of Class 1 and clause (a) of Class 2 of Section 4 of the Insurance Code [215 ILCS 5/4].
DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION

NOTICE OF EMERGENCY RULES

Section 937.20 Applicability

This Part shall apply to all insurers authorized to transact the class of business as set forth in clause (b) of Class 1 and clause (a) of Class 2 of Section 4 of the Insurance Code [215 ILCS 5/4].

Section 937.30 Definitions

Annual Statement means that statement required by Section 136 of the Illinois Insurance Code [215 ILCS 5/136] to be filed annually by the company with the Director of the Illinois Department of Financial and Professional Regulation - Division of Insurance.

Code means the Illinois Insurance Code [215 ILCS 5].

Department means the Department of Financial and Professional Regulation.

Director means the Director of the Illinois Department of Financial and Professional Regulation-Division of Insurance.

Division means the Illinois Department of Financial and Professional Regulation-Division of Insurance.

Insurer means an insurance company authorized to transact the class of business as set forth in clause (b) of Class 1 and clause (a) of Class 2 of Section 4 of the Insurance Code [215 ILCS 5/4].

Section 937.40 Reporting Requirements

a) On September 30, 2007 and quarterly thereafter, insurers subject to this Part shall file a quarterly report for the preceding quarter as prescribed in Exhibit A of this Part, providing information on health benefit plans written in this State.

b) Insurers to which this Part applies shall, on or before April 1 for the preceding year ending December 31, file a completed annual supplemental report as prescribed in Exhibit B and Exhibit C of this Part, providing information on health benefit plans written in this State.
DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION

NOTICE OF EMERGENCY RULES

c) All quarterly reports and supplemental annual reports filed pursuant to this Section shall be filed with the:

Financial Corporate Regulatory Division
Life Actuarial Section
Illinois Division of Insurance
320 Washington Street
Springfield, IL 62767-0001

Section 937.50 Penalties
EMERGENCY

Insurers to which this Part applies that fail to file quarterly reports and a supplemental annual report pursuant to this Part shall be subject to the provisions of Section 403A of the Code [215 ILCS 5/403A].
DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION

NOTICE OF EMERGENCY RULES

Section 937.EXHIBIT A Quarterly Report - Reporting Requirements and Instructions for Gross Quarterly Premiums and Enrollment

EMERGENCY

STATE OF ILLINOIS
DIVISION OF INSURANCE
QUARTERLY REPORT FOR ILLINOIS

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<th>SEE ATTACHED INSTRUCTIONS</th>
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<tr>
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Person Completing Form

Company

Telephone Number

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<th>(D) Loss Ratio</th>
<th>(E) Employer Groups</th>
<th>(F) Primary Insureds</th>
<th>(G) Covered Dependents</th>
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<th>(B) Direct Losses Incurred</th>
<th>(C) Direct Premiums Earned for New Business Only</th>
<th>(D) Loss Ratio</th>
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### Instruction for Completing the Quarterly Report for Accident and Health Insurers

Pursuant to the requirements of this Part, all insurers authorized to transact the class of business set forth in clause (b) of Class 1 and clause (a) of Class 2 of Section 4 of the Code [215 ILCS 5/4] are required to submit an accurate and complete report of their business in all lines specified on a quarterly basis. The reports shall be based on the following quarter years:

- October 1 through December 31
- January 1 through March 31
- April 1 through June 30
- July 1 through September 30

All premium and loss amounts must be reported in whole dollars.

### DEFINITIONS

**ROWS – ACCIDENT AND HEALTH COVERAGE TYPES**

- Comprehensive Major Medical: Major Medical and other Hospital-Surgical coverage.
ILLINOIS REGISTER

DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION

NOTICE OF EMERGENCY RULES

Major Medical: A hospital/surgical/medical expense contract that provides comprehensive benefits as defined by the state in which the contract will be delivered. This term does not include hospital indemnity, accidental death and dismemberment, workers' compensation, credit accident and health, short-term accident and health, accident-only, long-term care, Medicare supplement, pre-paid products, student blanket, stand-alone policies, dental-only, vision-only, prescription drug benefits, disability income, specified disease, or similar supplementary benefits; coverage issued as a supplement to liability insurance; workers' compensation or similar insurance; or automobile medical-payment insurance.

Hospital Surgical: An insurance contract that provides coverage to or reimburses the covered person for hospital, surgical, and/or medical expense incurred as a result of injury, sickness, and/or medical condition.

Administrative Services Only ("ASO"): A contractual arrangement utilized by a self-funded employer, whereby a separate company processes claims and provides other administrative services pertinent to the employer's health care plans. Please use columns (A), (B), and (C) to report fees associated with these services.

Accident Only: An insurance contract that provides coverage, alone or in combination, for death, dismemberment, disability, or hospital and medical care caused by or necessitated as a result of accident or specified kinds of accidents.

Accidental Death and Dismemberment: An insurance contract that pays a stated benefit in the event of death and/or dismemberment caused by accident or specified kinds of accidents.

Blanket Accident/Sickness: A health insurance contract that covers all of a class of persons not individually identified in the contract.

Dental: Insurance that provides benefits for routine dental examinations, preventive dental work, and dental procedures needed to treat tooth decay and diseases of the teeth and jaw.

Disability Income (includes Business Overhead Expense, Short-Term, Long-Term, and Combined Short Term and Long Term): A policy designed to compensate insureds for a portion of the income they lose because of a disabling injury or illness.

Excess/Stop Loss (includes Accident & Sickness, Managed Care, Provider, and Self-Funded Health Plan): This type of insurance may be extended to either a health plan or self-insured employer plan. Its purpose is to insure against the risk that any one claim will exceed a specific dollar amount or that an entire plan's losses will exceed a specific amount.
Hospital Indemnity: An insurance contract that pays a fixed dollar amount without regard to the actual expense incurred for each day the covered person is confined to the hospital as a result of injury, sickness, and/or medical condition.

Limited Benefit (includes Specified Disease, Critical Illness, Dread Disease, Dread Disease – Cancer Only, HIV Indemnity, Intensive Care, and Organ & Tissue Transplant):

(a) Pays benefits for the diagnosis and treatment of a specifically named disease or diseases. Benefits can be paid as expense incurred, per diem, or a principle sum.

(b) Provides a daily benefit for confinement in a qualified intensive care unit of a certified hospital. Benefits are specific to services delivered by the staff of a hospital intensive care unit. Benefits not to exceed a stated dollar amount per day.

(c) Provides benefits for services incurred as a result of human and/or non-human organ transplant. Benefits are specific to the delivery of care associated with the covered organ or tissue transplant. Benefits not to exceed a stated dollar amount per day.

Long Term Care: Coverage that includes long term care, nursing home, and home care contracts that provide reimbursement for these services.

Short Term Care (includes Home Health Care, Nursing Home, and Adult Day Care): Coverage that includes medical and other services to insured's who need constant care in their own home or in a nursing facility for periods of less than one year.

Medicare Supplement: A group or individual policy of (accident and sickness) insurance or a subscriber contract (of hospital and medical service associations), other than a policy issued pursuant to a contract under Section 1876 of the federal Social Security Act (42 USC 1395 et seq.) or a policy issued pursuant to a demonstration project specified in 42 USC Section 1395ss(g)(1), which is advertised, marketed or designed primarily as a supplement to reimbursements under Medicare for the hospital, medical or surgical expenses of persons eligible for Medicare (Section 363(2)(c) of the Code).

Champus/Tricare Supplement: Civilian Health and Medical Program of the Uniformed Services (Champus). A private health plan that provides beneficiaries eligible for Champus with supplemental health care coverage.
DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION

NOTICE OF EMERGENCY RULES

**Prescription Drug:** Prescription drug plan that covers the cost of drugs (except those dispensed in a hospital or extended care facility) that are required by either state or federal law to be dispensed by prescription. Drugs for which prescriptions are not required by law may be covered.

**Sickness:** Limited benefit expense policies which provide benefits for sickness only. Benefits do not exceed a stated dollar amount per day.

**Student:** A health insurance contract that covers a class of students not individually identified in the contract.

**Travel:** Limited benefit expense policies. Provides benefits for loss incurred while traveling generally outside a 100-mile radius of the U.S. borders. Subject to state limitations, coverage may extend to domestic as well as foreign travel. Policies may provide both sickness and injury benefits, and may include loss of baggage benefits and air transportation services for emergencies. Benefits not to exceed a stated dollar amount per day, per month or trip duration.

**Vision:** Limited benefit expense policies that provide benefits for eye care and eye care accessories. Generally provide a stated dollar amount for glasses and contacts and per annual eye examination. May include surgical benefits for injury or sickness associated with the eye.

**Other:** Accident and health coverage not specifically described above. Itemize, list, and specify coverage type.

**COLUMNS - INFORMATION REQUESTED FOR EACH ACCIDENT AND HEALTH COVERAGE TYPE**

**Direct Premiums Earned for New and Renewal Business (A):** Requested data is your company's direct premium earned from the first through the final day of the reporting quarter. Provide only premium specific to covered Illinois residents.

**Direct Losses Incurred (B):** Requested data is your company's direct losses incurred from the first through the final day of the reporting quarter. Provide only losses specific to covered Illinois residents.

**Direct Premiums Earned for New Business Only (C):** Requested data is your company's direct premium earned for new business only from the first through the final day of the reporting quarter. Provide only premium specific to Illinois residents.
NOTICE OF EMERGENCY RULES

Loss-Ratio (D): Requested data is your company's ratio of direct losses incurred to direct premiums earned for new and renewal business from the first through the final day of the reporting quarter. Provide only losses and premium specific to covered Illinois residents.

Employers, If Group Coverage, at End of Reporting Quarter (E): For all group categories, provide the number of employers who covered Illinois resident employees, as of the final day of the reporting quarter.

Primary Insureds at End of Reporting Quarter (F): Provide the total number of resident individual policyholders or resident group employee/member certificateholders, as of the final day of the reporting quarter.

Covered Dependents at End of Reporting Quarter (G): Provide the total number of individuals covered by the primary insured's plan who receive coverage due to his or her dependent relationship to the primary insured, as of the final day of the reporting quarter.

Member Months at End of Reporting Quarter (H): Provide the total number of months that each member or policyholder is provided coverage from the first day through the final day of the reporting quarter.

Wellness Program Participation Premium Discounts (I): Dollar value of plan-administered premium discounts, rebates of premium or contribution, or waivers of all or part of a surcharge or cost-sharing mechanism (e.g., deductibles, co-pays, or coinsurance) provided to individual insureds for their participation in a bona fide wellness program, from the first day through the final day of the reporting quarter. To qualify as a bona fide wellness program, the program must: 1) offer a limited reward or discount; 2) be reasonably designed to promote good health and disease prevention; 3) allow policyholders to qualify for the program's reward at least once per year; and 4) be available to all similarly situated employees, with reasonable alternative standards for those for which the general standard is unreasonably difficult or medically inadvisable.

ADDITIONAL DEFINITIONS

If additional definitions are needed, please send a self-addressed stamped envelope to the address below (no phone calls please). Any other questions regarding the completion of this form should be addressed to the Life Actuarial Section of the Illinois Division of Insurance (217) 782-4515.

Financial Corporate Regulatory Division
Life Actuarial Section
Illinois Division of Insurance
DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION

NOTICE OF EMERGENCY RULES

320 W. Washington St.
Springfield, IL 62767-0001
NOTICE OF EMERGENCY RULES

Section 937. EXHIBIT B  Supplemental Report - Reporting Requirements and Instructions for Gross Annual Premiums and Enrollment

EMERGENCY

STATE OF ILLINOIS
DIVISION OF INSURANCE
ANNUAL STATEMENT SUPPLEMENT FOR ILLINOIS

DUE DATE: [SEE ATTACHED INSTRUCTIONS]

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<th>(D) Loss Ratio</th>
<th>(E) Employer Groups</th>
<th>(F) Primary Insureds</th>
<th>(G) Covered Dependents</th>
<th>(H) Member Months</th>
<th>(I) Wellness Premium Discounts</th>
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<th>(B) Direct Losses Incurred</th>
<th>(C) Direct Premiums Earned for New Business Only</th>
<th>(D) Loss Ratio</th>
<th>(E) Employer Groups</th>
<th>(F) Primary Insureds</th>
<th>(G) Covered Dependents</th>
<th>(H) Member Months</th>
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### Instructions for Completing the Supplemental Report for Accident and Health Insurers

Pursuant to the requirements of this Part, all insurers authorized to transact the class of business set forth in clause (b) of Class 1 and clause (a) of Class 2 of Section 4 of the Code [215 ILCS 5/4] are required to submit an accurate and complete report of their business in all lines specified.

All premium and loss amounts must be reported in whole dollars.

Data reported in Exhibit A must be consistent with data reported in the Annual Statement.

### DEFINITIONS

**ROWS – ACCIDENT AND HEALTH COVERAGE TYPES**

Comprehensive Major Medical: Major Medical and other Hospital-Surgical coverage.

**Major Medical:** A hospital/surgical/medical expense contract that provides comprehensive benefits as defined by the state in which the contract will be delivered. This term does not include hospital indemnity, accidental death and dismemberment, workers’ compensation, credit...
accident and health, short-term accident and health, accident-only, long-term care, Medicare supplement, pre-paid products, student blanket, stand-alone policies, dental-only, vision-only, prescription drug benefits, disability income, specified disease, or similar supplementary benefits; coverage issued as a supplement to liability insurance; workers' compensation or similar insurance; or automobile medical-payment insurance.

**Hospital Surgical:** An insurance contract that provides coverage to or reimburses the covered person for hospital, surgical, and/or medical expense incurred as a result of injury, sickness, and/or medical condition.

**Administrative Services Only ("ASO"):** A contractual arrangement utilized by a self-funded employer, whereby a separate company processes claims and provides other administrative services pertinent to the employer's health care plans. Please use columns (A), (B), and (C) to report fees associated with these services.

**Accident Only:** An insurance contract that provides coverage, alone or in combination, for death, dismemberment, disability, or hospital and medical care caused by or necessitated as a result of accident or specified kinds of accidents.

**Accidental Death and Dismemberment:** An insurance contract that pays a stated benefit in the event of death and/or dismemberment caused by accident or specified kinds of accidents.

**Blanket Accident/Sickness:** A health insurance contract that covers all of a class of persons not individually identified in the contract.

**Dental:** Insurance that provides benefits for routine dental examinations, preventive dental work, and dental procedures needed to treat tooth decay and diseases of the teeth and jaw.

**Disability Income (includes Business Overhead Expense, Short-Term, Long-Term, and Combined Short Term and Long Term):** A policy designed to compensate insureds for a portion of the income they lose because of a disabling injury or illness.

**Excess/Stop Loss (includes Accident & Sickness, Managed Care, Provider, and Self-Funded Health Plan):** This type of insurance may be extended to either a health plan or self-insured employer plan. Its purpose is to insure against the risk that any one claim will exceed a specific dollar amount or that an entire plan's losses will exceed a specific amount.
DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION

NOTICE OF EMERGENCY RULES

Hospital Indemnity: An insurance contract that pays a fixed dollar amount without regard to the actual expense incurred for each day the covered person is confined to the hospital as a result of injury, sickness, and/or medical condition.

Limited Benefit (includes Specified Disease, Critical Illness, Dread Disease, Dread Disease – Cancer Only, HIV Indemnity, Intensive Care, and Organ & Tissue Transplant):

(d) Pays benefits for the diagnosis and treatment of a specifically named disease or diseases. Benefits can be paid as expense incurred, per diem, or a principle sum.

(e) Provides a daily benefit for confinement in a qualified intensive care unit of a certified hospital. Benefits are specific to services delivered by the staff of a hospital intensive care unit. Benefits not to exceed a stated dollar amount per day.

(f) Provides benefits for services incurred as a result of human and/or non-human organ transplant. Benefits are specific to the delivery of care associated with the covered organ or tissue transplant. Benefits not to exceed a stated dollar amount per day.

Long Term Care: Coverage that includes long term care, nursing home, and home care contracts that provide reimbursement for these services.

Short Term Care (includes Home Health Care, Nursing Home, and Adult Day Care): Coverage that includes medical and other services to insured's who need constant care in their own home or in a nursing facility for periods of less than one year.

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DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION

NOTICE OF EMERGENCY RULES

**Prescription Drug:** Prescription drug plan that covers the cost of drugs (except those dispensed in a hospital or extended care facility) that are required by either state or federal law to be dispensed by prescription. Drugs for which prescriptions are not required by law may be covered.

**Sickness:** Limited benefit expense policies which provide benefits for sickness only. Benefits do not exceed a stated dollar amount per day.

**Student:** A health insurance contract that covers a class of students not individually identified in the contract.

**Travel:** Limited benefit expense policies. Provides benefits for loss incurred while traveling generally outside a 100-mile radius of the U.S. borders. Subject to State limitations, coverage may extend to domestic as well as foreign travel. Policies may provide both sickness and injury benefits, and may include loss of baggage benefits and air transportation services for emergencies. Benefits not to exceed a stated dollar amount per day, per month or trip duration.

**Vision:** Limited benefit expense policies that provide benefits for eye care and eye care accessories. Generally provide a stated dollar amount for glasses and contacts and per annual eye examination. May include surgical benefits for injury or sickness associated with the eye.

**Other:** Accident and health coverage not specifically described above. Itemize, list, and specify coverage type.

**COLUMNS - INFORMATION REQUESTED FOR EACH ACCIDENT AND HEALTH COVERAGE TYPE**

**Direct Premiums Earned for New and Renewal Business (A):** Requested data is your company's direct premium earned from January 1 through December 31, inclusive, for the reporting calendar year. Provide only premium specific to covered Illinois residents.

**Direct Losses Incurred (B):** Requested data is your company's direct losses incurred from January 1 through December 31, inclusive, for the reporting calendar year. Provide only losses specific to covered Illinois residents.

**Direct Premiums Earned for New Business Only (C):** Requested data is your company's direct premium earned for new business only from January 1 through December 31, inclusive, for the reporting calendar year. Provide only premium specific to Illinois residents.
NOTICE OF EMERGENCY RULES

Loss-Ratio (D): Requested data is your company's ratio of direct losses incurred to direct premiums earned for new and renewal business from January 1 through December 31, inclusive, for the reporting calendar year. Provide only losses and premium specific to covered Illinois residents.

Employers, If Group Coverage, at End of Reporting CY (E): For all group categories, provide the number of employers who covered Illinois resident employees, as of December 31 for the reporting calendar year.

Primary Insureds at End of Reporting CY (F): Provide the total number of resident individual policyholders or resident group employee/member certificateholders, as of December 31 for the reporting calendar year.

Covered Dependents at End of Reporting CY (G): Provide the total number of individuals covered by the primary insured's plan who receive coverage due to his or her dependent relationship to the primary insured, as of December 31 for the reporting calendar year.

Member Months at End of Reporting CY (H): Provide the total number of months that each member or policyholder is provided coverage, as of December 31 for the reporting calendar year.

Wellness Program Participation Premium Discounts (I): Dollar value of plan-administered premium discounts, rebates of premium or contribution, or waivers of all or part of a surcharge or cost-sharing mechanism (e.g., deductibles, co-pays, or coinsurance) provided to individual insureds for their participation in a bona fide wellness program from January 1 through December 31, inclusive, for the reporting calendar year. To qualify as a bona fide wellness program, the program must: 1) offer a limited reward or discount; 2) be reasonably designed to promote good health and disease prevention; 3) allow policyholders to qualify for the program's reward at least once per year; and 4) be available to all similarly situated employees, with reasonable alternative standards for those for which the general standard is unreasonably difficult or medically inadvisable.

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Financial Corporate Regulatory Division
Life Actuarial Section
Illinois Division of Insurance
DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION

NOTICE OF EMERGENCY RULES

320 W. Washington St.
Springfield, IL 62767-0001
**NOTICE OF EMERGENCY RULES**

Section 937.EXHIBIT C  Supplemental Report - Reporting Requirements and Instructions for Average Provider Reimbursement Rates

**EMERGENCY**

**STATE OF ILLINOIS**
**DIVISION OF INSURANCE**

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**Person Completing Form**

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Instructions for Completing Supplemental Reports for Accident and Health Insurers

All companies authorized to transact the class of business set forth in clause (b) of Class 1 and clause (a) of Class 2 of Section 4 of the Insurance Code [215 ILCS 5/4] are required to submit an accurate and complete report of their provider reimbursement rates as specified per Exhibit B to Part 937.

All average provider reimbursement rates must be reported to the nearest cent.

All requested average provider reimbursement data shall be calculated based on rates paid from January 1 through December 31, inclusive, for the reporting calendar year.

DEFINITIONS

CPT Codes: Five-character, all numeric configurations (e.g., 90806) published annually by the American Medical Association. Each code represents the Current Procedural Terminology ("CPT") for a given provider service. (Note: CPT Code descriptions provided below are summary descriptions.)

- **00406**: Anesthesia for breast and lymph node removal
- **45378**: Scope of Colon for Diagnosis
- **76075**: Bone Density Scan of Hips, Pelvis, and/or Spine
- **88141**: Cytopathology, Cervical or Vaginal, Requiring Physician Interpretation
- **88142**: Cytopathology, Cervical or Vaginal, Automated Thin Layer Preparation
- **88305**: Level IV Surgical Pathology
- **88307**: Level V Surgical Pathology
- **90782**: Injection
- **90806**: Individual Psychotherapy (45 to 50 minutes)
- **90807**: Individual Psychotherapy (45 to 50 minutes) with Medical Evaluation
- **92015**: Determination of Refractive State
- **93000**: EKG Cardiogram with Interpretation and Report
- **93015**: Cardiac Stress Test with Exercise and/or Drugs
- **95004**: Allergy Skin Tests
- **95165**: Antigen Therapy Services
- **99204**: Office/Outpatient Visit, New Patient, Physical Exam (45 minutes)
- **99212**: Office/Outpatient Visit, Existing Patient, Problem Focused (10 minutes)
DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION

NOTICE OF EMERGENCY RULES

- **99213**: Office/Outpatient Visit, Existing Patient, Problem Focused (15 minutes)
- **99214**: Office/Outpatient Visit, Existing Patient, Moderate Severity (25 minutes)
- **99282**: Emergency Department Visit, Low to Moderate Severity
- **99283**: Emergency Department Visit, Moderate Severity
- **99391**: Infant Periodic Preventive Exam

COLUMNS - AVERAGE PROVIDER REIMBURSEMENT RATES

General Definitions

**Average Provider Reimbursement Rate:** Given the specifications of each column, shall be determined by dividing the total amount paid to providers for delivery of services associated with a particular CPT code by the total number of times providers were reimbursed for delivery of services associated with the same CPT code. The calculation shall include only rates paid for services provided to covered Illinois residents.

**Contracted Provider:** Any health care provider who directly or indirectly enters into an agreement or arrangement with a health care plan.

- **Health Care Provider:** Any physician, hospital facility, or other person licensed or otherwise authorized to deliver health care services.
- **Health Care Plan:** A plan that establishes, operates, or maintains a network of health care providers that have entered into an agreement with the plan to provide health care services to enrollees to whom the plan has the ultimate obligation to arrange for the provision of or payment for services through organizational arrangements.

**Region 1:** The Medicare Physician Fee Schedule Area commonly referred to as "Chicago, IL" (0095216).

**Region 2:** The Medicare Physician Fee Schedule Area commonly referred to as "Suburban Chicago, IL" (0095215).

**Region 3:** The Medicare Physician Fee Schedule Area commonly referred to as "East St. Louis, IL" (0095212).

**Region 4:** The Medicare Physician Fee Schedule Area commonly referred to as "Rest of Illinois" (0095299).

Column Definitions
NOTICE OF EMERGENCY RULES

**Region 1 Average Rate Paid to Contracted Providers (A):** The average reimbursement rate paid to contracted providers for services delivered in Region 1. Provide rates specific to covered Illinois residents.

**Region 1 Average Rate Paid to Non-Contracted Providers (B):** The average reimbursement rate paid to non-contracted providers for services delivered in Region 1. Provide rates specific to covered Illinois residents.

**Region 2 Average Rate Paid to Contracted Providers (C):** The average reimbursement rate paid to contracted providers for services delivered in Region 2. Provide rates specific to covered Illinois residents.

**Region 2 Average Rate Paid to Non-Contracted Providers (D):** The average reimbursement rate paid to non-contracted providers for services delivered in Region 2. Provide rates specific to covered Illinois residents.

**Region 3 Average Rate Paid to Contracted Providers (E):** The average reimbursement rate paid to contracted providers for services delivered in Region 3. Provide rates specific to covered Illinois residents.

**Region 3 Average Rate Paid to Non-Contracted Providers (F):** The average reimbursement rate paid to non-contracted providers for services delivered in Region 3. Provide rates specific to covered Illinois residents.

**Region 4 Average Rate Paid to Contracted Providers (G):** The average reimbursement rate paid to contracted providers for services delivered in Region 4. Provide rates specific to covered Illinois residents.

**Region 4 Average Rate Paid to Non-Contracted Providers (H):** The average reimbursement rate paid to non-contracted providers for services delivered in Region 4. Provide rates specific to covered Illinois residents.

**Illinois Average Rate Paid to Contracted Providers (I):** The average reimbursement rate paid to contracted providers for services delivered in Illinois. Provide rates specific to covered Illinois residents.

**Illinois Average Rate Paid to Non-Contracted Providers (J):** The average reimbursement rate paid to non-contracted providers for services delivered in Illinois. Provide rates specific to covered Illinois residents.
DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION

NOTICE OF EMERGENCY RULES

**Illinois Average Rate Paid to All Providers (K):** The average reimbursement rate paid to all providers for services delivered in Illinois. Provide rates specific to covered Illinois residents.

**ADDITIONAL DEFINITIONS**

If additional definitions are needed, please send a self-addressed stamped envelope to the address below (no phone calls please). Any other questions regarding the completion of this form should be addressed to the Life Actuarial Section of the Illinois Division of Insurance (217) 782-4515.

Financial Corporate Regulatory Division  
Life Actuarial Section  
Illinois Division of Insurance  
320 W. Washington St.  
Springfield, IL 62767-0001
ILLINOIS REGISTER

ILLINOIS GAMING BOARD

NOTICE OF CORRECTION TO NOTICE ONLY

1) **Heading of the Part**: Riverboat Gambling

2) **Code Citation**: 86 Ill. Adm. Code Part 3000

3) **The Notice of Proposed Rule being corrected appeared at**: 31 Ill. Reg. 10394; July 20, 2007

4) **The Information being corrected is as follows**: In Question 10, the answer should have been "yes" and the correction is as follows:

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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 July 10, 2007 through July 16, 2007 and have been scheduled for review by the Committee at its August 14, 2007 meeting. 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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DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION

NOTICE OF FINE IMPOSED UNDER

THE RESIDENTIAL MORTGAGE LICENSE ACT OF 1987

Pursuant to Section 4-5(h) of the Residential Mortgage License Act of 1987 (the "Act") [205 ILCS 635/4-5(h)], notice is hereby given that the Department of Financial and Professional Regulation, Division of Banking of the State of Illinois has issued a fine of $30,000 per Consent Order No. 2007-MBR-24, against Protecta Home Loans, Inc., License No. MB.0004142 of Chicago, Illinois, a licensee under the Act, for violating the terms of the Act and the rules and regulations adopted thereunder, effective June 4, 2007. For further reference link to: www.idfpr.com
DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION

NOTICE OF FINE IMPOSED UNDER

THE RESIDENTIAL MORTGAGE LICENSE ACT OF 1987

Pursuant to Section 4-5(h) of the Residential Mortgage License Act of 1987 (the "Act") [205 ILCS 635/4-5(h)], notice is hereby given that the Department of Financial and Professional Regulation, Division of Banking, of the State of Illinois has issued a fine of $7,500 against American Federal Financial Services, Inc., License No. MB.0004222 of Rolling Meadows, Illinois, a licensee under the Act, for violating the terms of the Act and the rules and regulations adopted thereunder, effective June 28, 2007. For further reference link to: www.idfpr.com
DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION

NOTICE OF RESCISSION OF REVOCATION AND FINE IMPOSED UNDER

THE RESIDENTIAL MORTGAGE LICENSE ACT OF 1987

Pursuant to Section 4-5(h) of the Residential Mortgage License Act of 1987 (the "Act") [205 ILCS 635/4-5(h)], notice is hereby given that the Department of Financial and Professional Regulation, Division of Banking of the State of Illinois has rescinded the license revocation and imposed a fine of $1,500 per Final Order No. 2007-MBR-05-b, against The Mortgage Authority, LLC, License No. MB.0006847 of Deerfield, Illinois, a licensee under the Act, for violating the terms of the Act and the rules and regulations adopted thereunder, effective June 25, 2007. For further reference link to: www.idfpr.com
Pursuant to Section 4-5(h) of the Residential Mortgage License Act of 1987 (the "Act") [205 ILCS 635/4-5(h)], notice is hereby given that the Department of Financial and Professional Regulation, Division of Banking, of the State of Illinois has revoked the license of Providential Bancorp, Ltd, License No. MB.0005744 of Chicago, Illinois, a licensee under the Act, for violating the terms of the Act and the rules and regulations adopted thereunder, June 29, 2007.

For further reference link to: www.idfpr.com
DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION

NOTICE OF REVOCATION IMPOSED UNDER

THE RESIDENTIAL MORTGAGE LICENSE ACT OF 1987

Pursuant to Section 4-5(h) of the Residential Mortgage License Act of 1987 (the "Act") [205 ILCS 635/4-5(h)], notice is hereby given that the Department of Financial and Professional Regulation, Division of Banking, of the State of Illinois has revoked the license of CNB Financial Corporation, License No. MB.0006319 of Matteson, Illinois, a licensee under the Act, for violating the terms of the Act and the rules and regulations adopted thereunder, June 29, 2007. For further reference link to: www.idfpr.com
Pursuant to Section 4-5(h) of the Residential Mortgage License Act of 1987 (the "Act") [205 ILCS 635/4-5(h)], notice is hereby given that the Department of Financial and Professional Regulation, Division of Banking, of the State of Illinois has revoked the license of LoanApp, Inc., License No. MB.6759101 of San Jose, California, Illinois, a licensee under the Act, for violating the terms of the Act and the rules and regulations adopted thereunder, June 28, 2007. For further reference link to: www.idfpr.com
DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION

NOTICE OF FINE IMPOSED UNDER

THE RESIDENTIAL MORTGAGE LICENSE ACT OF 1987

Pursuant to Section 4-5(h) of the Residential Mortgage License Act of 1987 (the "Act") [205 ILCS 635/4-5(h)], notice is hereby given that the Department of Financial and Professional Regulation, Division of Banking of the State of Illinois has issued a fine of $3,000 per Consent Order No. 2007-MBR-20, against Investor’s Choice Mortgage Corporation, License No. MB.6760072 of Plainfield, Illinois, a licensee under the Act, for violating the terms of the Act and the rules and regulations adopted thereunder, effective May 18, 2007. For further reference link to: www.idfpr.com
NOTICE OF FINE IMPOSED UNDER

THE RESIDENTIAL MORTGAGE LICENSE ACT OF 1987

Pursuant to Section 4-5(h) of the Residential Mortgage License Act of 1987 (the "Act") [205 ILCS 635/4-5(h)], notice is hereby given that the Department of Financial and Professional Regulation, Division of Banking, of the State of Illinois has issued a fine of $7,500 against First Capital Mortgage Corporation, License No. MB.0005585 of Chicago, Illinois, a licensee under the Act, for violating the terms of the Act and the rules and regulations adopted thereunder, effective May 24, 2007. For further reference link to: www.idfpr.com
DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION

NOTICE OF FINE IMPOSED UNDER

THE RESIDENTIAL MORTGAGE LICENSE ACT OF 1987

Pursuant to Section 4-5(h) of the Residential Mortgage License Act of 1987 (the "Act") [205 ILCS 635/4-5(h)], notice is hereby given that the Department of Financial and Professional Regulation, Division of Banking, of the State of Illinois has issued a fine of $5,000 against Value Mortgage Funding, Inc., License No. MB.6759431 of Scottsdale, Arizona, a licensee under the Act, for violating the terms of the Act and the rules and regulations adopted thereunder, effective May 24, 2007. For further reference link to: www.idfpr.com
DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION

NOTICE OF FINE RESCINDED UNDER

THE RESIDENTIAL MORTGAGE LICENSE ACT OF 1987

Pursuant to Section 4-5(h) of the Residential Mortgage License Act of 1987 (the "Act") [205 ILCS 635/4-5(h)], notice is hereby given that the Department of Financial and Professional Regulation, Division of Banking of the State of Illinois has rescinded the fine of $500 against Sylvester Realty Company, License No. MB.0005879 of Riverside, Illinois, a licensee under the Act, for violating the terms of the Act and the rules and regulations adopted thereunder, effective May 24, 2007. For further reference link to: www.idfpr.com
DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION

NOTICE OF FINE RESCINDED UNDER

THE RESIDENTIAL MORTGAGE LICENSE ACT OF 1987

Pursuant to Section 4-5(h) of the Residential Mortgage License Act of 1987 (the "Act") [205 ILCS 635/4-5(h)], notice is hereby given that the Department of Financial and Professional Regulation, Division of Banking of the State of Illinois has rescinded the fine of $10,000 against Investor’s Choice Mortgage Corporation, License No. MB.6760072 of Plainfield, Illinois, a licensee under the Act, for violating the terms of the Act and the rules and regulations adopted thereunder, effective May 25, 2007. For further reference link to: www.idfpr.com
DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION

NOTICE OF REVOCATION IMPOSED UNDER

THE RESIDENTIAL MORTGAGE LICENSE ACT OF 1987

Pursuant to Section 4-5(h) of the Residential Mortgage License Act of 1987 (the "Act") [205 ILCS 635/4-5(h)], notice is hereby given that the Department of Financial and Professional Regulation, Division of Banking, of the State of Illinois has revoked the license of First Financial Mortgage, Inc., License No. MB.0005500 of Oak Brook Terrace, Illinois, a licensee under the Act, for violating the terms of the Act and the rules and regulations adopted thereunder, effective May 30, 2007. For further reference link to: www.idfpr.com
WHEREAS, in 2004 nearly 8 children and teenagers ages 19 and under were killed in the United States with guns every day; and

WHEREAS, the cost of one gun crime can be as high as $1.79 million, including medical treatment and the prosecution and imprisonment of the offender; and

WHEREAS, medical costs of gun violence put a burden on employers, health service providers and the State of Illinois because at least 80% of the economic costs of treating firearm injuries are paid for with taxpayer dollars; and

WHEREAS, on September 13, 1994, Congress passed the Federal Assault Weapons Ban, requiring domestic gun manufacturers to stop production of semi-automatic assault weapons and large capacity ammunition feeding devices (ammunition clips holding more than 10 rounds), except for military or police use; and

WHEREAS, during the ten-year federal ban, the prevalence of assault weapons traced to crimes declined 66%; and

WHEREAS, the Federal Assault Weapons Ban expired on September 13, 2004, leaving Illinois without any statewide measures to combat the proliferation of assault weapons and large capacity ammunition feeding devices; and

WHEREAS, in the absence of federal regulation, the State of Illinois must act to protect the health, safety, and welfare of its citizens from the violence caused by the presence and proliferation of assault weapons in Illinois; and

WHEREAS, large capacity ammunition feeding devices enable assault weapons and .50 caliber rifles to fire thirty rounds of ammunition in under five seconds, reload automatically and carry up to 100 rounds; and

WHEREAS, Senate Bill 1007 would largely prohibit the knowing delivery, sale, purchase or possession of large capacity ammunition feeding devices in Illinois; and

WHEREAS, passage of Senate Bill 1007 would advance the State's interest in protecting the health, safety and welfare of Illinoisans by abating gun violence and the associated health care and societal costs caused by large capacity ammunition feeding devices;
THEREFORE, pursuant to Article IV, Section 5 (b) of the Illinois Constitution of 1970, I hereby call and convene the 95th General Assembly in a special session to commence on July 11, 2007, at 2:00 p.m., to consider and discuss Senate Bill 1007 as well as the impact of assault weapon violence on the State's health care expenditures and general fiscal health.

Dated: July 10, 2007
Issued: July 10, 2007

2007-238
EMERGENCY PROCLAMATION FOR MCLEAN COUNTY

WHEREAS, On July 7, 2007, at approximately 12:50 p.m., a cargo tanker loaded with gasoline crashed on I-74 westbound approximately one mile west of Downs, Illinois. The cargo tank was compromised, and the gasoline cargo spilled and ignited. A substantial amount of flaming gasoline drained into a flood plain area between and under both the east and westbound bridges, consuming the truck wreckage and engulfing both bridges. As a consequence, this State has sustained severe damage to its road systems, which include bridges, roadbeds and other facilities. The damage occurred on the Federal-Aid Highways System; and

WHEREAS, Damage throughout the I-74 corridor in McLean County has been of such an extent that immediate repairs are necessary. Such conditions constitute an emergency as is contemplated by the terms of Sections 125 and 120(e) of Title 23, U.S.C.;

THEREFORE, I, Rod R. Blagojevich, Governor of the State of Illinois, do hereby proclaim an emergency to exist in McLean County as a result of a catastrophic failure caused by an external cause and consequent danger to life and damage to property including the Federal-Aid Highways. The immediate repair and reconstruction of the damaged highways is vital to the security, well-being, and health of the citizens of the State of Illinois. The Federal Highway Division Administrator is hereby requested to concur in the declaration of this emergency.

In testimony whereof, I have hereunto subscribed my name and caused the seal of the State of Illinois to be affixed at Springfield, the 11th day of July, 2007.

Issued: July 11, 2007
Filed: July 12, 2007

2007-239
FORMER FIRST LADY "LADY BIRD" JOHNSON
WHEREAS, former First Lady "Lady Bird" Johnson passed away on Wednesday, July 11, 2007 at the age of 94; and

WHEREAS, born Claudia Alta Taylor on December 22, 1912, the nickname "Lady Bird" caught on early during her infancy after a caretaker declared that she looked like a ladybird; and

WHEREAS, after graduating from the University of Texas with a Bachelor of Arts in history in 1933, "Lady Bird" hoped to become a newspaper reporter. However, those plans changed after "Lady Bird" met and wed a young congressional aide named Lyndon Baines Johnson in 1934; and

WHEREAS, after John F. Kennedy's premature death in 1963, Lyndon Johnson became president. From that point on, Mrs. Johnson worked tirelessly for the beautification of America; and

WHEREAS; one of the many organizations Mrs. Johnson supported, The Society for a More Beautiful National Capital, which she began, has been credited with inspiring similar programs throughout the country; and

WHEREAS, Mrs. Johnson was also a leading advocate of the Highway Beautification Act to beautify the nation's highway system by limiting billboards and planting along roadside areas; and

WHEREAS, Mrs. Johnson continued to promote beautification projects even after leaving the White House and her husband’s death in 1973. In 1982, she co-founded the National Wildflower Research Center to preserve and reintroduce native plants in landscape architecture; and

WHEREAS, above all else, Mrs. Johnson will be remembered for these deeds and all her other contributions to the conservation of the environment for future generations to enjoy:

THEREFORE, I, Rod R. Blagojevich, Governor of the State of Illinois, do hereby honor the life and legacy of FORMER FIRST LADY "LADY BIRD" JOHNSON by joining President George W. Bush in ordering the flag of the United States of America to fly at half-staff at all state facilities on the day of her interment, Sunday, July 15, 2007, until sunset on such day.

Issued by Governor Rod R. Blagojevich July 13, 2007.
Filed with the Secretary of State on July 13, 2007.
ILLINOIS ADMINISTRATIVE CODE
Issue Index - With Effective Dates

Rules acted upon in Volume 31, Issue 30 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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- **Signature: ____________________________**

**Send Payment To:** Secretary of State  
Fax Order To: (217) 524-0308

Department of Index  
Administrative Code Division  
111 E. Monroe  
Springfield, IL  62756

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