

Illinois Osteopathic Medical Society

End-of-Session Report

By

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OVERVIEW OF THE SESSION

The House and Senate concluded its spring session during the last few minutes of May 31, 2011. The Senate took action on the final parts of the budget at approximately 11:55 pm and officially adjourned at 12:01 AM. The House completed its business and adjourned at 10:55 PM.

This year, the Illinois General Assembly focused on these two main issues: 1) pass a budget; and 2) create new legislative districts. As expected, both issues dominated legislators' focus during the final days of session.

The unanswered question remains: will the Governor approve the state budget or will he veto it? The Governor has already approved the legislation for the redistricting maps, but remains unclear if he will veto the budget. What is clear is that he does intend to call the legislature back into session sometime this summer to finalize plans for construction projects throughout Illinois. No date has been set as this report is being written.

STATE BUDGET SENT TO GOVERNOR

As always, the approval of the state budget came down to the final stretch. This year rather than have the budget passed one gigantic piece of legislation, the House approved 13 different appropriation bills containing the numerous expenditure authorizations. The Senate passed its own version several weeks ago, but their expenditure lines were higher than what the House approved. During the final days of session, there was speculation over which budget they would accept. Several attempts were made to reach a compromise. In the end, the House version of the budget was adopted by both houses.

It is now up to the Governor to decide if he will sign the budget into law or use one of his forms of veto powers to change the budget. If he chooses to use his veto pen, he will force the General Assembly back into a special session when any action will then take a super majority. To override the Governor's veto or pass a new budget with a super majority, the support of the Republicans in each chamber would be needed.

The bills that contain the budget include: HB 123, HB 124, HB 132, HB 326, HB 327, HB 2107, HB 2109, HB 2165, HB 2167, HB 2168, HB 3700, and HB 3717. The budget for the Illinois Department of Public Health, Department of Human Services, and for the Department of

Healthcare and Family Service is contained in House Bill 3717 which is a part of this report. Please let me know if you want more specific information on the budget.

LAPSE PERIOD SPENDING

Once again, to assist with balancing the state budget, the General Assembly increased the time it gives itself to pay its vendors. SB 2172 (President Cullerton/Speaker Madigan) extends the lapse period spending from August 31, 2011 to December 31, 2011. This will allow the state to float outstanding bills for an additional four months. This has unfortunately become common practice the past several years.

BORROWING BILLS FAIL

In an effort to pay down unpaid bills, (at least \$6.2 billion) Senator Sullivan (D, Quincy) offered a package of bills to "restructure" the states tax exempt bonding. This legislation would have allowed paying \$1.48 billion for non-government vendors, \$1.34 billion group insurance payments, \$800 million for corporate income tax refunds, and \$2.7 billion owed to governmental entities like municipalities, counties, and school districts.

There was no new dedicated revenue identified to specifically pay the bond payments so the bond principal and interest would have been paid from General Revenue Funds (GRF). The life of the bonds was 7 years and would have an interest cost of \$800 million. The overall cost of the borrowing would essentially have had a price tag of about \$300 million.

Senate Bills 342, SB 343, SB 344, and SB 345 were defeated each by a vote of 19 yes, 23 no, and 4 present votes.

GAMING EXPANSION - SB 744 (Sen. Link/Rep. Lang)

After several years of trying to expand gaming in Illinois as revenue source and an effort to save horse racing, the General Assembly passed a bill to create 5 new casinos, allow slot machines at race tracks, allow expansion of current casinos, allow off track betting (OTB) at the state fair grounds, and other changes.

If signed into law, the bill will allow for the development of five new casinos throughout Illinois. It is estimated that if all the portions of SB 744 are implemented, the State could realize between \$1 to \$1.6 billion annually.

CONGRESSIONAL MAP – SB 1178 (Sen. Raoul/Majority Leader Currie)

Every ten years, the Illinois General Assembly is required to draw new political boundary lines for legislative districts. The purpose of this exercise is to ensure that our legislative districts reflect our population. For details on the new Congressional map please refer to last night's issue of QuickView. To see the maps in Google Maps please [CLICK HERE](#). I will send the new Senate and House District maps soon.

IOMS HIGHLIGHTS

IOMS was very active in the legislative process. For a complete list and description of all the bills followed for IOMS, please reference the two sections at the end of the report version that is posted on the IOMS website (www.IOMS.org) due to length.

House Bill 1665 (Gabel, D/Evanston) -- Lay Midwives

For the past three years, IOMS has had to focus on the issue of Lay Midwifery because it has been introduced each year. This session once again, the issue was debated on numerous occasions.

As introduced, the legislation attempted to create the Home Birth Integration Act. It would have mandated Illinois hospitals implement emergency transfer protocols for home birth patients developed in collaboration with community midwives. IOMS, in addition to many other organizations (IAFP, ISMS, March of Dimes, ACOG, ACOOG, and others) strongly opposed this legislation.

A special thank you is directed to Dr. Teresa Hubka and Dr. Richard A. Feely for coordinating an effective meeting with the sponsor of the bill, Rep. Robyn Gabel and a group of lay midwives. Following this meeting, no further action was taken on this legislation during the Spring Legislative Session.

House Bill 1698 -- Workers' Compensation Passes

House Bill 1698 (Amendment 3) includes several provisions supported by the business community, including reductions in payments to physicians by 30% and hospitals that care for injured workers. The bill also makes changes to the review process that determines an injury's severity and cost, as well as cap awards for the carpal tunnel syndrome.

Employers will be allowed to organize medical networks for handling workers' compensation cases. Business claims this will lower costs and allow selection of doctors who do not cater as much to workers. The bill also addresses potential abuse by firing the arbitrators who decide claims. New arbitrators will serve three-year terms instead of six years and will be barred from accepting gifts. This provision is to address the concerns that arbitrators have been too cozy with workers and their lawyers.

According to the supporters of this bill, these changes and others are meant to reduce the budget by \$3 billion a year. **It should be noted that through much of the negotiations, the entire medical community was not allowed to be a part of the discussions.** In addition, only one Republican voted for this bill, newly elected Rep. Chris Nybo (Elmhurst).

Senate Bill 1555 -- Health Insurance Exchange

Under the leadership of Illinois' Director of Insurance Michael McRaith, the legislature passed a health exchange proposal that will work toward ensuring that Illinois does not lose out on more than \$200 million in federal funding. Many preferred Senate Bill 1729 as it was a result of more than six months of stakeholder meetings, citizen input, public meetings and expert testimony. Some fear SB 1555 may weaken the power of small businesses to negotiate for lower prices.

Senate Bill 1555 creates the Illinois Health Benefits Exchange Law. If signed into law, the bill provides that beginning October 1, 2013, the State shall establish a State health benefits exchange to be known as the Illinois Health Benefits Exchange in order to help individuals and small employers with no more than 50 employees shop for, select, and enroll in qualified, affordable private health plans. The bill also sets forth provisions concerning Exchange functions, the Department of Insurance's and the Commission on Governmental Forecasting and Accountability's authority, the Legislative Study Committee, Committee studies, and federal action.

House Bill 1530 -- Mental Health Parity

After years of debate, HB 1530 amends the Illinois Insurance Code to provide for mental health parity. The bill requires insurers to provide coverage for hospital or medical expenses under a group policy of accident and health insurance or health care plan shall provide coverage under the policy for treatment of serious mental illness and substance use disorders (instead of serious mental illness). IOMS joined several other organizations in supporting this landmark legislation.

Senate Bill 140 -- Pain Management

During the early portion of the Spring Session, IOMS was involved with clarification of Senate Bill 140 (Martinez, D/Chicago). The bill was introduced to create the Interventional Pain Medicine Act. As initially defined, it was our concern that the intent of the bill was to allow only anesthesiologists to administer pain medication that involved interventional techniques. The bill also provided that interventional techniques could not be delegated.

This bill was introduced at the request of the Illinois Association of Anesthesiologists with the assistance of the Illinois State Medical Society. After many meetings, several amendments were offered but many organizations continued to oppose the bill and failed to advance in the legislative process.

Senate Bill 2255 -- APNs

After years of negotiations, the Advanced Practice Nurses and the Illinois State Medical Society reached an agreement to allow a collaborating physician to delegate authority to an advanced practice nurse to prescribe any Schedule II controlled substances if all conditions are met. In addition, the bill provides that a physician assistant must provide evidence of satisfactory

completion of 45 contact hours in pharmacology for any new license issued with Schedule II authority. This legislation passed both houses and awaits action by the Governor.

House Bill 106 --“Safe Haven” Extended

The bill extends “Safe Havens” to campus police stations. Safe Havens are locations where an infant may be left with no fear of criminal investigations. Other Safe Havens include: hospitals, fire stations, police stations.

Similar Bills -- Health Care Professional -- Sex Crimes

This year several bills were introduced regarding health care professionals convicted of sex crimes. House Bill 1271 (Rep. William Burns/D-Chicago), Senate Bill 1762 (Sen. Kirk Dillard/R-Westmont), House Bill 220 (Rep. Jack Franks/D-Marengo) automatically and permanently revokes the license of any health care professional who has been convicted of a sex offense or criminal battery. The language intends to protect patient safety while ensuring that proper due process is given to those health care workers that have had charges filed against them. **In mid-May, House Bill 1271 passed both houses and awaits action by the Governor.**

Similar Bills -- Extension of the Medical Practice Act

House Bill 214 (Rep. Dan Reitz/D-Sparta), Senate Bill 1388 (Sen. Michael Frerichs/D-Champaign) and Senate Bill 1540 as amended (Sen. Iris Martinez/D-Chicago) would extend the sunset date of the Illinois Medical Practice Act of 1987 by ten years to January 1, 2021. **The act is currently set to sunset on November 30, 2011.** This legislation also contains language concerning medical discipline and sets clear standards for physician profiling. Legislation to extend the Medical Practice Act is still pending and is expected to be considered at the Veto Session in late October.

VETO SESSION

The House and Senate announced they will return for their Veto session October 25, 26, 27 and November 8, 9, and 10. It should also be noted that the Governor intends to recall the Illinois General Assembly back into session this summer

Complete Listing and Status Of All Bills Followed on Behalf of IOMS

Legislative Information
System

6/6/2011

97th General Assembly

10:47:16 PM

HB 30

Short Description: MEDICAL CANNABIS

House Sponsors

Rep. Lou Lang-Angelo Saviano-Ann Williams-Robyn Gabel-Kenneth Dunkin,
Sara Feigenholtz and Kelly M. Cassidy

Synopsis As Introduced

Creates the Compassionate Use of Medical Cannabis Pilot Program Act. Provides that when a person has been diagnosed by a physician as having a debilitating medical condition, the person and the person's primary caregiver may be issued a registry identification card by the Department of Public Health that permits the person or the person's primary caregiver to legally possess no more than 6 cannabis plants and 2 ounces of dried usable cannabis. Amends the Cannabis Control Act to make conforming changes, including that any registered qualifying patient or registered primary caregiver who distributes cannabis to someone who is not allowed to use cannabis is subject to a penalty enhancement of not more than 2 years in prison or a fine of not more than \$2,000, or both, for abuse of the Compassionate Use of Medical Cannabis Pilot Program Act. Provides that the Act is repealed 3 years after its effective date. Repeals the research provisions of the Cannabis Control Act. Provides that the Department of Public Health shall develop and disseminate educational information about the health risks associated with the abuse of cannabis and prescription medications. Provides that the Department shall promulgate rules governing the manner in which it shall consider applications for and renewals of registration certificates for medical cannabis organizations. Provides that the provisions of the Act are severable. Effective immediately.

House Committee Amendment No. 1

Replaces everything after the enacting clause. Creates the Compassionate Use of Medical Cannabis Pilot Program Act. Provides that when a person has been diagnosed by a physician as having a debilitating medical condition, the person and the person's primary caregiver may be issued a registry identification card by the Department of Public Health that permits the person or the person's primary caregiver to legally possess no more 2.5 ounces of usable cannabis during a 14-day period. Amends the Illinois Vehicle Code. Prohibits a qualified patient from operating a motor vehicle unless 12 hours have passed since the patient last consumed medical cannabis. Amends the Cannabis Control Act to

make conforming changes. Provides that the provisions of the Act are severable. Provides that the Act is repealed 3 years after its effective date. Repeals the research provisions of the Cannabis Control Act. Effective immediately.

House Floor Amendment No. 2

Replaces everything after the enacting clause. Reinserts the provisions of the bill as amended but: (1) adds to the list of debilitating conditions for which a person may be a qualifying patient and eligible to possess medical cannabis; (2) establishes various conditions relating to employer actions in regards to an employee who is a qualifying patient and who is deemed by the employer to be impaired because of the use of cannabis; (3) amends the Election Code to make it unlawful for any nonprofit medical cannabis organization, or any political action committee created by any nonprofit medical cannabis organization to make a campaign contribution to any political committee established to promote the candidacy of a candidate or public official and to make it unlawful for any candidate, political committee, or other person to knowingly accept or receive any such contribution and to make it unlawful for any officer or agent of a nonprofit medical cannabis organization to consent to any contribution or expenditure by the nonprofit medical cannabis organization; and (4) amends the Retailers' Occupation Tax Act, the Use Tax Act, the Service Occupation Tax Act, and the Service Use Tax Act to provide that "prescription and nonprescription medicines and drugs" includes medical cannabis purchased from a registered nonprofit medical cannabis organization under the Compassionate Use of Medical Cannabis Pilot Program Act. Effective immediately.

State Debt Impact Note, House Floor Amendment No. 2 (Government Forecasting & Accountability)

HB 30, as amended by House Amendment 2, would not change the amount of authorization for any type of State-issued or State-supported bond, and, therefore, would not affect the level of State indebtedness.

Pension Note, House Floor Amendment No. 2 (Government Forecasting & Accountability)

HB 30 (H-AM 2) will not impact any public pension fund or retirement system in Illinois.

Correctional Note, House Floor Amendment No. 2 (Dept of Corrections)

This legislation has minimal fiscal and population impact on the Department of Corrections.

House Floor Amendment No. 3

Replaces everything after the enacting clause. Reinserts the provisions of the bill as amended but: (1) changes the application fee to a \$5,000 non-refundable application fee and a \$20,000 certificate fee for those applicants selected by the Department of Public health to receive a nonprofit medical cannabis organization registration certificate; provides that such fees may be adjusted subject to the discretion of the Department in order to adequately fund the implementation and enforcement of the Compassionate Use of Medical Cannabis Pilot Program Act; (2) provides that the Act shall not be construed to authorize the possession of more than 2.5 ounces of cannabis at any time without authority from the Department of Public Health; (3) deletes provision that the Department of Public Health shall give reasonable notice of an inspection of a registered nonprofit medical cannabis organization or testing of cannabis; and (4) makes other technical and grammatical changes. Effective immediately.

House Floor Amendment No. 4

Excludes from the definition of "qualifying patient" active public safety personnel. Defines "active public safety personnel".

Last Action

Date	Chamber	Action
5/31/2011	House	Rule 19(a) / Re-referred to Rules Committee

HB 105

Short Description: PATIENT RIGHT TO KNOW ACT

House Sponsors

Rep. Mary E. Flowers-Rita Mayfield-Greg Harris-La Shawn K. Ford-Jack D. Franks, Jack McGuire, Linda Chapa LaVia, Ann Williams and Monique D. Davis

Senate Sponsors

(Sen. William Delgado-Donne E. Trotter-Iris Y. Martinez)

Synopsis As Introduced

Creates the Patients' Right to Know Act. Provides for the Department of Financial and Professional Regulation to make available to the public a profile of each licensed physician and chiropractor on an Internet website or in writing if

requested by an individual. Requires on the profiles the full name of the physician, any criminal convictions for felonies and Class A misdemeanors, any Department disciplinary action within the most recent 5 years, name of medical schools attended and date of attendance and graduation, specialty board certification, the number of years in practice and locations, the name of hospital where physician has privileges, and other requirements. Permits the Disciplinary Board to provide copies of the profiles to the physicians prior to publication and allows 60 days for the physician to correct any inaccuracies. Provides the physician the option to exclude any information concerning academic appointments, teaching responsibilities, publications in peer-reviewed journals, and any professional and community service awards if the physician or chiropractor chooses not to publish such information. Sets any penalties for a violation of this Act to be provided for in the Medical Practice Act of 1987. Repeals similar provisions of the Medical Practice Act of 1987 that were enacted by Public Act 94-677, which has been held unconstitutional. Effective immediately.

Last Action

Date	Chamber	Action
5/17/2011	House	Passed Both Houses

HB 106

Short Description: SAFE HAVEN-INFANTS-POLICE DEPT

House Sponsors

Rep. Naomi D. Jakobsson-Elaine Nekritz-Sandy Cole-Patricia R. Bellock-Chad Hays, Greg Harris, Daniel Biss, Thaddeus Jones, Tom Cross, Robyn Gabel, Linda Chapa LaVia, Chris Nybo, Norine Hammond, Robert W. Pritchard, Randy Ramey, Jr., Michelle Mussman, Camille Y Lilly, Kay Hatcher and Lisa M. Dugan

Senate Sponsors

(Sen. Donne E. Trotter, Edward D. Maloney-John G. Mulroe, Mike Jacobs-Iris Y. Martinez, Wm. Sam McCann, Suzi Schmidt, Heather A. Steans-Susan Garrett, Jeffrey M. Schoenberg, Terry Link, Kimberly A. Lightford, Shane Cultra, Ron Sandack, Mattie Hunter, Thomas Johnson, Pamela J. Althoff, Christine Radogno-William Delgado and M. Maggie Crotty)

Synopsis As Introduced

Amends the Abandoned Newborn Infant Protection Act. Expands the definition of the term "police station" to include a campus police department located on any college or university owned or controlled by the State or any private college or private university that is not owned or controlled by the State.

House Committee Amendment No. 1

Changes the definition of "police station" to mean a municipal police station, a county sheriff's office, a campus police department located on any college or university owned or controlled by the State or any private college or private university that is not owned or controlled by the State when employees of the campus police department are present, or any of the district headquarters of the Illinois State Police (rather than a municipal police station, a county sheriff's office, or a campus police department located on any college or university owned or controlled by the State or any private college or private university that is not owned or controlled by the State). Adds an immediate effective date.

Last Action

Date	Chamber	Action
5/17/2011	House	Passed Both Houses

HB 123

Short Description: \$COMPTROLLER-TECH

House Sponsors

Rep. Michael J. Madigan-Barbara Flynn Currie-Fred Crespo-Al Riley

Senate Sponsors

(Sen. Dan Kotowski)

Synopsis As Introduced

Appropriates \$2 from the General Revenue Fund to the Office of the Comptroller for its FY12 ordinary and contingent expenses. Effective July 1, 2011.

House Committee Amendment No. 1

Replaces everything after the enacting clause. Makes various appropriations, reappropriations, and supplemental appropriations. Effective July 1, 2011, except specified provisions are effective immediately.

House Floor Amendment No. 3

Further amends the bill by changing and adding various appropriations.

Last Action

Date	Chamber	Action
5/30/2011	House	Passed Both Houses

HB 127

Short Description: \$DCFS-TECH

House Sponsors

Rep. Michael J. Madigan-Barbara Flynn Currie

Synopsis As Introduced

Appropriates \$2 from the General Revenue Fund to the Department of Children and Family Services for its FY12 ordinary and contingent expenses. Effective July 1, 2011.

Last Action

Date	Chamber	Action
2/8/2011	House	Assigned to Appropriations-Human Services Committee

HB 128

Short Description: \$DCEO-TECH

House Sponsors

Rep. Michael J. Madigan-Barbara Flynn Currie

Synopsis As Introduced

Appropriates \$2 from the General Revenue Fund to the Department of Commerce and Economic Opportunity for its FY12 ordinary and contingent expenses. Effective July 1, 2011.

Last Action

Date	Chamber	Action
2/8/2011	House	Assigned to Appropriations-General Services Committee

HB 150

Short Description: NURSE LICENSURE COMPACT

House Sponsors

Rep. Sandra M. Pihos-Patricia R. Bellock-Renée Kosel-Darlene J. Senger, Franco Coladipietro and Mike Fortner

Synopsis As Introduced

Amends the Nurse Practice Act. Ratifies and adopts the Nurse Licensure Compact. Allows for reciprocity of licensure of licensed practical nurses and registered nurses among the states. Provides for administration of the Compact by the Nursing Act Coordinator. Provides that the licensing board shall participate in a Compact Evaluation Initiative designed to evaluate the effectiveness and operability of the Compact. Provides that the Compact does not relieve employers from complying with statutorily imposed obligations. Provides that the Compact does not supersede existing State labor laws. Makes changes relating to the purposes of the Compact. Effective January 1, 2012.

Fiscal Note (Financial & Professional Regulation)

HB 150 has a negative fiscal impact of approximately \$221,675 annually to the Illinois Department of Financial & Professional Regulation due to expenses and loss of revenues related to inclusion in the multi-state Nurse Licensure Compact.

Last Action

Date	Chamber	Action
3/17/2011	House	Rule 19(a) / Re-referred to Rules Committee

HB 160

Short Description: CRIME VICTIMS IMPACT STATEMENT

House Sponsors

Rep. Chapin Rose

Synopsis As Introduced

Amends the Rights of Crime Victims and Witnesses Act. Provides that in any case where a defendant has been convicted of a violent crime or a juvenile has been adjudicated a delinquent for a violent crime, the victim or his or her representative and immediate family or household member upon their request shall (rather than may) be permitted by the court to orally address (rather than address) the court regarding the impact of the defendant's criminal conduct or juvenile delinquent conduct has upon them. Deletes provision that the court has discretion to determine the number of oral presentations of victim impact statements.

Last Action

Date	Chamber	Action
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4/15/201 1	House	Rule 19(a) / Re-referred to Rules Committee
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HB 214

Short Description: MED PRACT-SUNSET-EXAM-REENACT

House Sponsors

Rep. Dan Reitz-Angelo Saviano-Brandon W. Phelps-Patrick J. Verschoore-Michael P. McAuliffe, JoAnn D. Osmond, Darlene J. Senger, Randy Ramey, Jr., Chad Hays, Chapin Rose, Ann Williams, Jim Sacia, Dan Brady, Rich Brauer, Franco Coladipietro, Michael G. Connelly, Mike Bost, Timothy L. Schmitz, Jim Durkin, Michael J. Zalewski, Greg Harris, Karen May, Daniel V. Beiser, Lisa M. Dugan, André M. Thapedi, Thomas Holbrook, Dwight Kay, Jim Watson, Bill Mitchell, John D. Cavaletto, David Reis, Tom Cross, Robert W. Pritchard, Adam Brown, Richard Morthland and Wayne Rosenthal

Synopsis As Introduced

Amends the Regulatory Sunset Act. Extends the repeal date of the Medical Practice Act of 1987 from November 30, 2011 to January 1, 2021. Also includes revisory changes. Amends the Medical Practice Act of 1987. Provides that in determining what action to take or whether to proceed with prosecution of a complaint, the Complaint Committee shall consider any recommendation made by the Department. Sets forth criteria that the Licensing Board may consider in making a determination of professional capacity, and makes other changes concerning professional capacity. Makes a change concerning a visiting professor permit. Changes references from "licensure without examination" to "licensure by endorsement". Makes a change concerning requiring an examination. Adds specific requirements for mental and physical examinations required by the Licensing Board or Disciplinary Board, and authorizes a substance abuse or sexual offender evaluation. Changes the reporting requirements for State's Attorneys. Allows the disclosure of certain confidential information to a medical licensing authority of another state or jurisdiction in certain instances. Repeals a Section concerning the practice of medicine by persons licensed in any other state who have applied for a license to practice medicine in this State. Makes other changes. Also reenacts certain provisions of Public Act 94-677, which was declared to be unconstitutional; includes explanatory and validation provisions. Effective immediately.

Last Action

Date	Chamber	Action
3/17/2011	House	Rule 19(a) / Re-referred to Rules Committee

HB 220

Short Description: MED PRACT ACT-SEX OFFENDERS

House Sponsors

Rep. Jack D. Franks-Patricia R. Bellock-Mary E. Flowers-Lisa M. Dugan-Karen A. Yarbrough, Emily McAsey, Thaddeus Jones, William D. Burns, Camille Y Lilly, Karen May, Carol A. Sente, Deborah Mell, Jack McGuire, Keith Farnham, Linda Chapa LaVia, Sandra M. Pihos, Michelle Mussman, Anthony DeLuca, Fred Crespo, Michael G. Connelly, Sandy Cole, Dennis M. Reboletti and Mark H. Beaubien, Jr.

Senate Sponsors

(Sen. Kirk W. Dillard-Pamela J. Althoff, Ira I. Silverstein and Martin A. Sandoval)

Synopsis As Introduced

Amends the Medical Practice Act of 1987. Provides that the Department of Financial and Professional Regulation shall revoke the license or visiting permit of any person issued under this Act to practice medicine or to treat human ailments without the use of drugs and without operative surgery, who has been convicted of committing (1) any felony under the Illinois Controlled Substances Act or the Methamphetamine Control and Community Protection Act, (2) a Class 1 felony under Sections 8A-3 and 8A-6 of the Illinois Public Aid Code, or (3) a sexual assault or other battery against his or her patient. Provides that the Department shall investigate any licensee upon notification from any law enforcement agency of a criminal complaint setting forth facts which, if proven, would constitute grounds for suspension or revocation under the Act. Provides that any law enforcement agency in the State must provide immediate notification to the Department when it receives a criminal complaint against a licensee under this Act that alleges sexual assault or other battery on a patient. Effective immediately.

House Committee Amendment No. 1

Replaces everything after the enacting clause. Amends the Department of Professional Regulation Law of the Civil Administrative Code of Illinois. Provides that any licensed health care worker, who has been (1) convicted of committing a sexual criminal act that requires registration under the Sex Offender Registration

Act against a patient in the course of patient care or treatment, (2) has been convicted of a criminal battery against any patient, (3) a forcible felony, or (4) required as part of a criminal sentence to register under the Sex Offender Registration Act, then the license of the health care worker shall by operation of law be permanently revoked without a hearing. Provides that no person registered as a sex offender may receive a license as a health care worker in Illinois. Requires that within 15 business days after receiving notice from the State's Attorney of the filing of criminal charges against the health care worker, the Secretary shall issue an administrative order that the health care worker may only practice with a chaperone during all patient encounters pending the outcome of the criminal proceedings. Adds provisions concerning the confidentiality of certain information and documents. Effective immediately.

House Committee Amendment No. 2

Requires that a health care worker who fails to comply with an administrative order, fails to file a compliance plan, or fails to follow the compliance plan shall subject the health care worker to temporary suspension of his or her professional license until the completion of the criminal proceedings. Changes certain references from "discipline" to "revocation". Makes other changes.

Senate Floor Amendment No. 2

Replaces everything after the enacting clause. Amends the Department of Professional Regulation Law of the Civil Administrative Code of Illinois. Provides that when a licensed health care worker (1) has been convicted of a criminal act that requires registration under the Sex Offender Registration Act; (2) has been convicted of a criminal battery against any patient in the course of patient care or treatment, including any offense based on sexual conduct or sexual penetration; (3) has been convicted of a forcible felony; or (4) is required as a part of a criminal sentence to register under the Sex Offender Registration Act, then the license of the health care worker shall by operation of law be permanently revoked without a hearing. Provides that no person convicted of those offenses or required to register as a sex offender may receive a license as a health care worker in Illinois. Provides that immediately after receiving notice from the State's Attorney of the filing of criminal charges alleging a health care worker committed any offense for which the sentence includes registration as a sex offender; a criminal battery against a patient; or a forcible felony, then the State's Attorney shall provide notice to the Department of the health care worker's name, address, practice address, and license number and the patient's name and a copy of the criminal charges filed. Provides that within 5 business days after receiving notice from the State's Attorney, the Secretary shall issue an administrative order that the health care worker shall immediately practice only with a chaperone during all patient encounters. Provides that a chaperone must be a licensed health care

worker and the chaperone shall provide written notice to all the health care worker's patients explaining the Department's order to use a chaperone. Provides that each patient shall sign an acknowledgement that they received the notice. Provides that the notice to the patient of criminal charges shall include a statement that the health care worker is presumed innocent until proven guilty. Provides that the Department may adopt rules necessary to implement the provisions. Adds provisions concerning the confidentiality of certain information and documents. Effective 30 days after becoming law.

Last Action

Date	Chamber	Action
5/28/2011	House	Passed Both Houses

HB 279

Short Description: MED PATIENT RT-DISCRIMINATION

House Sponsors

Rep. Mary E. Flowers-Rita Mayfield-La Shawn K. Ford-Monique D. Davis and Camille Y Lilly

Senate Sponsors

(Sen. William Delgado)

Synopsis As Introduced

Amends the Medical Patient Rights Act. Provides that a hospital must include in its written statement of patients' rights the right not to be discriminated against by the hospital due to the patient's race, color, or national origin where such characteristics are not relevant to the patient's medical diagnosis and treatment, and that the statement should put the patient on notice on how to initiate a grievance with the hospital or with the Illinois Department of Public Health regarding improper discrimination. Sets forth discrimination grievance procedures and provides language all hospitals must post for the benefit of patients regarding the hospital's emergency room anti-discrimination policy. Effective immediately.

Senate Floor Amendment No. 2

Provides that the statement of hospital patient's rights shall provide each admitted patient or the patient's representative or guardian with notice of how the patient may lodge a grievance with the Illinois Department of Public Health and the Illinois Department of Human Rights (now, only the Illinois Department of Public Health).

Last Action

Date	Chamber	Action
5/28/2011	House	Passed Both Houses

HB 286

Short Description: DCFS-PSYCHOTROPIC MEDS-KIDS

House Sponsors

Rep. Mary E. Flowers-Chapin Rose-Dan Brady-Monique D. Davis

Senate Sponsors

(Sen. William Delgado)

Synopsis As Introduced

Creates the Administration of Psychotropic Medications to Children Act. Requires prior approval from an authorized agent before the administration of psychotropic medications to children for whom the Department of Children and Family Services has legal responsibility. Requires authorized agents to receive training on the list of psychotropic medications approved by the Pharmacological Review Committee, a committee created under the Act for the purpose of developing and publishing a manual that lists all Committee approved psychotropic medications, including the purpose of these medications, the acceptable range of dosages, contraindications, and time limits, if any. Contains provisions on medication approval standards; rules governing the administration of psychotropic medications to children housed in residential facilities or facilities run by the Illinois Department of Corrections; on-site inspections of residential facilities; required forms; training requirements; penalties for violators of the Act; and other matters. Effective immediately.

House Floor Amendment No. 1

Replaces everything after the enacting clause. Creates the Administration of Psychotropic Medications to Children Act. Requires the Department of Children and Family Services to promulgate final rules, on or before October 1, 2011, amending its current rules establishing and maintaining standards and procedures to govern the administration of psychotropic medications. Sets forth the substance of the amended rules. Requires the Department to establish and maintain rules designed to ensure compliance with the rules promulgated pursuant to the Act. Requires the Department to submit an annual report to the General Assembly concerning the administration of psychotropic medication to persons for whom it is legally responsible. Effective immediately.

Last Action

Date	Chamber	Action
5/17/2011	House	Passed Both Houses

HB 299

Short Description: HIV/AIDS REGISTRY-TEST RESULTS

House Sponsors

Rep. La Shawn K. Ford-Esther Golar

Senate Sponsors

(Sen. Christine Radogno)

Synopsis As Introduced

Amends the HIV/AIDS Registry Act to provide that the information concerning those cases included in the HIV/AIDS Registry shall include all CD4 and HIV viral load test results.

House Committee Amendment No. 1

Replaces everything after the enacting clause with the bill as introduced with

the following changes. Provides that the Department of Public Health shall establish and maintain an HIV/AIDS Registry consisting of a record of all cases (instead of a record of cases) of HIV and AIDS which occur in the State. Specifies that the CD4 test results shall include counts and percentages of any value and that the HIV viral load test results are those that are both detectable and undetectable.

Senate Committee Amendment No. 2

Provides that hospitals and laboratories may only be required to report CD4 and HIV viral load test results for tests performed on or after 90 days after the date that the Department of Public Health furnishes an electronic method for the reporting of such results to the Department and only if a hospital or laboratory has an electronic health record that enables the hospital or laboratory to identify HIV patients. Provides that until electronic laboratory reporting is established, hospitals and laboratories shall continue to report cases of HIV and AIDS in Illinois in accordance with the administrative rules adopted by the Department that are in effect on May 1, 2011.

Last Action

Date	Chamber	Action
5/31/2011	House	Passed Both Houses

HB 786

Short Description: HEALTH-TECH

House Sponsors

Rep. Brandon W. Phelps-Thomas Morrison-Jim Sacia-John D. Cavaletto-David Reis, Dwight Kay, Joe Sosnowski, Randy Ramey, Jr., Richard Morthland, Wayne Rosenthal, Michael G. Connelly, Adam Brown, Jil Tracy and Roger L. Eddy

Synopsis As Introduced

Amends the Mental Health and Developmental Disabilities Code. Makes a technical change in a Section concerning the definition of "care and custody".

House Committee Amendment No. 1

Replaces everything after the enacting clause. Creates the Ultrasound Opportunity Act. Sets forth legislative findings and definitions. Provides that at any facility where abortions are performed the physician who is to perform the abortion, the referring physician, or another qualified person working in conjunction with either physician shall offer any woman seeking an abortion after 6 weeks of gestation an opportunity to receive and view an active ultrasound of her unborn child by someone qualified to perform ultrasounds at the facility, or at a facility listed in a listing of local ultrasound providers provided by the facility, at least one hour prior to the woman having any part of an abortion performed or induced, and prior to the administration of any anesthesia or medication in preparation for the abortion. Provides that the Department of Public Health shall prepare and make available a reporting form, to be submitted by each abortion facility to the Department annually. Provides that the requirements of the Act shall not apply when, in the medical judgment of the physician performing or inducing the abortion, there exists a medical emergency. Contains a severability provision. Effective immediately.

Correctional Note, House Committee Amendment No. 1 (Dept of Corrections)

This legislation has no fiscal or population impact on the Department of Corrections.

Judicial Note, House Committee Amendment No. 1 (Admin Office of the Illinois Courts)

Would neither increase nor decrease the number of judges needed in the state.

Land Conveyance Appraisal Note, House Committee Amendment No. 1 (Dept. of Transportation)

No land conveyances are included in this bill.

Balanced Budget Note, House Committee Amendment No. 1 (Office of Management and Budget)

This Bill's fiscal impact is unknown at this time and will be dependent upon the cost of the reporting administration incurred by the Illinois Department of Public Health. Any costs associated with this legislation are a result of reporting requirements required in this bill.

Pension Note, House Committee Amendment No. 1 (Government Forecasting & Accountability)

HB 786 (H-AM 1) will not impact any public pension fund or retirement system in Illinois.

Housing Affordability Impact Note, House Committee Amendment No. 1 (Housing Development Authority)

This bill will have no effect on the cost of constructing, purchasing, owning, or selling a single-family residence.

State Mandates Fiscal Note, House Committee Amendment No. 1 (Dept. of Commerce & Economic Opportunity)

HB 786 (H-AM 1) does not create a State mandate.

Home Rule Note, House Committee Amendment No. 1 (Dept. of Commerce & Economic Opportunity)

HB 786 (H-AM 1) does not pre-empt home rule authority.

Fiscal Note, House Committee Amendment No. 1 (Dept. of Public Health)

The forms the Department of Public Health (DPH) currently uses to collect information from providers regarding abortions can be modified with minimal fiscal impact to comply with the provisions of HB 786 (H-AM 1). However, since the cost of any ultrasounds provided as a result of this bill would not be borne by DPH, the Department has not estimated those costs, which would depend on the number of ultrasounds actually performed and could be significant.

Correctional Note, House Floor Amendment No. 3 (Dept of Corrections)

This legislation has no fiscal or population impact on the Department.

Pension Note, House Floor Amendment No. 3 (Government Forecasting & Accountability)

HB 786 (H-AM 3) will not impact any public pension fund or retirement system in Illinois.

State Debt Impact Note, House Floor Amendment No. 3 (Government Forecasting & Accountability)

HB 786, as amended by House Amendment 3, would not change the amount of authorization for any type of State-issued or State-supported bond, and, therefore, would not affect the level of State indebtedness.

Judicial Note, House Floor Amendment No. 3 (Admin Office of the Illinois Courts)

Would neither increase nor decrease the number of judges needed in the state.

Balanced Budget Note, House Floor Amendment No. 3 (Office of Management and Budget)

This Bill's fiscal impact is unknown at this time and will be dependent upon the cost of the reporting administration incurred by the Illinois Department of Public Health. Any costs associated with this legislation are a result of reporting requirements required in this bill.

Home Rule Note, House Floor Amendment No. 3 (Dept. of Commerce & Economic Opportunity)

HB 786 (H-AM 3) does not pre-empt home rule authority.

State Mandates Fiscal Note, House Floor Amendment No. 3 (Dept. of Commerce & Economic Opportunity)

HB 786 (H-AM 3) creates a service mandate.

Land Conveyance Appraisal Note, House Floor Amendment No. 3 (Dept. of Transportation)

No land conveyances are included in this bill.

Fiscal Note, House Floor Amendment No. 3 (Dept. of Public Health)

There are two fiscal issues with this bill. The total estimated cost per year to the Illinois Department of Public Health to develop a report and collect the data would be approximately \$275,000. The second fiscal issue is the actual cost of the ultrasound. The bill is silent as to who pays for the ultrasound. Using internet research, the average insurance cost for an ultrasound is \$200. \$200 times 2,120,000 estimated surgeries per year in Illinois = \$424,000,000.

Fiscal Note, House Floor Amendment No. 4 (Dept. of Public Health)

There are two fiscal issues with this bill. The total estimated cost per year to the Illinois Department of Public Health to develop a report and collect the data would be approximately \$275,000. The second fiscal issue is the actual cost of the ultrasound. The bill is silent as to who pays for the ultrasound. Using internet research, the average insurance cost for an ultrasound is \$200. \$200 times 2,120,000 estimated surgeries per year in Illinois = \$424,000,000.

Housing Affordability Impact Note, House Floor Amendment No. 3 (Housing Development Authority)

This bill will have no effect on the cost of constructing, purchasing, owning, or selling a single-family residence.

Housing Affordability Impact Note, House Floor Amendment No. 4 (Housing Development Authority)

This bill will have no effect on the cost of constructing, purchasing, owning, or selling a single-family residence.

Last Action

Date	Chamber	Action
4/15/2011	House	Rule 19(a) / Re-referred to Rules Committee

HB 1152

Short Description: DHS-COMM BEHAVIORAL HLTHCARE

House Sponsors

Rep. John E. Bradley-Patricia R. Bellock-Camille Y Lilly-Al Riley, Greg Harris, Marlow H. Colvin, Karen A. Yarbrough, Angelo Saviano, Sara Feigenholtz, Deborah Mell, Lisa M. Dugan, Fred Crespo and Ann Williams

Senate Sponsors

(Sen. M. Maggie Crotty, William Delgado-Michael Noland, Ira I. Silverstein-Dan Kotowski and Mattie Hunter)

Synopsis As Introduced

Amends the Mental Health and Developmental Disabilities Administrative Act. Provides that the Department of Human Services shall strive to guarantee that persons, including children, suffering from mental illness, substance abuse, and other behavioral disorders have access to locally accessible behavioral health care providers who have the ability to treat the person's conditions in a cost effective, outcome-based manner. Requires the Department to designate as essential community behavioral health care providers organizations that meet certain qualifications; promote the co-location of primary and behavioral health care services centers; and work towards reducing Illinois' underserved and health professional shortage areas. Contains provisions concerning fee-for-service compensation; term limits for essential community behavioral health care providers; and other matters. Effective immediately.

House Floor Amendment No. 1

In regard to ensuring persons suffering from mental illness, substance abuse, and other behavioral disorders have access to locally accessible behavioral health care providers, requires the Department of Human Services to work toward improving access in Illinois' underserved and health professional shortage areas (rather than work towards reducing Illinois' underserved and health

professional shortage areas). Provides that the Department, through administrative rule, shall describe the standards and process of designating an essential community behavioral health care provider, establishing the community to be served, other criteria for selection, and grounds for termination. Provides that an essential community behavioral health care provider shall be compensated (rather than entitled to compensation) on a fee-for-service basis within a global budget or within a risk-based incentive contract in accordance with the contracts and standards of the respective payors (rather than within a risk-based incentive contract).

Last Action

Date	Chamber	Action
5/12/2011	House	Passed Both Houses

HB 1164

Short Description: STATE AGENCIES-NURSE OVERTIME

House Sponsors

Rep. Richard Morthland

Synopsis As Introduced

Amends the Department of Children and Family Services Powers Law of the Civil Administrative Code of Illinois, the Mental Health and Developmental Disabilities Administrative Act, the Department of Public Health Powers and Duties Law of the Civil Administrative Code of Illinois, the Department of Veterans Affairs Act, the Illinois Public Aid Code, and the Unified Code of Corrections. Provides that no nurse who is paid an hourly wage and who has direct responsibility to oversee or carry out nursing care or related duties may be required to work mandated overtime except in the case of an unforeseen emergent circumstance when such overtime is required only as a last resort, and limits the time of such overtime. Provides that when a nurse is mandated to work up to 12 consecutive hours, the nurse must be allowed at least 8 consecutive hours of off-duty time. Prohibits retaliation because a nurse refuses to work mandated overtime as prohibited under these provisions. Authorizes the filing of

complaints alleging violations of these provisions. Effective immediately.

Last Action

Date	Chamber	Action
3/17/2011	House	Rule 19(a) / Re-referred to Rules Committee

HB 1238

Short Description: INS CD-PRE-EXISTING CONDITION

House Sponsors

Rep. Karen May-Robyn Gabel-Sara Feigenholtz-Mary E. Flowers-Al Riley

Synopsis As Introduced

Amends the Illinois Insurance Code. Provides that beginning January 1, 2012, no group or individual policy of accident and health insurance issued in this State that covers hospital or medical expenses, for an insured or the insured's immediate family or children, shall exclude coverage for any condition defined under the Department of Insurance rules as a pre-existing condition.

Last Action

Date	Chamber	Action
3/17/2011	House	Rule 19(a) / Re-referred to Rules Committee

HB 1271

Short Description: HEALTH CARE WORKER-SEX CRIME

House Sponsors

Rep. William D. Burns-Jack D. Franks-Patricia R. Bellock-Sidney H. Mathias, Karen May, Deborah Mell, Jack McGuire, Michelle Mussman, Marlow H. Colvin, Emily McAsey, Kenneth Dunkin, Camille Y Lilly, Al Riley and Derrick Smith

Senate Sponsors

(Sen. Kirk W. Dillard-Iris Y. Martinez, Ira I. Silverstein and Dave Syverson)

Synopsis As Introduced

Amends the Department of Professional Regulation Law of the Civil Administrative Code of Illinois. Provides that any licensed health care worker, who has been (1) convicted of committing a sexual criminal act that requires registration under the Sex Offender Registration Act against a patient in the course of patient care or treatment, (2) has been convicted of a criminal battery against any patient, (3) a forcible felony, or (4) required as part of a criminal sentence to register under the Sex Offender Registration Act, then the license of the health care worker shall by operation of law be permanently revoked without a hearing. Provides that no person registered as a sex offender may receive a license as a health care worker in Illinois. Requires that within 15 business days after receiving notice from the State's Attorney of the filing of criminal charges against the health care worker, the Secretary shall issue an administrative order that the health care worker may only practice with a chaperone during all patient encounters pending the outcome of the criminal proceedings. Adds provisions concerning the confidentiality of certain information and documents. Effective immediately.

House Floor Amendment No. 3

Replaces everything after the enacting clause. Reinserts the introduced bill with changes. Provides that no person who has been convicted of any specified offense or is required to register as a sex offender may receive a license as a health care worker in Illinois. Provides that a chaperone must be a licensed health care worker and the chaperone shall provide written notice to all the health care worker's patients explaining the Department's order to use a chaperone. Provides that each patient shall sign an acknowledgement that they received the notice. Provides that the notice to the patient of criminal charges shall include a statement that the health care worker is presumed innocent until proven guilty. Provides that the Department may adopt rules necessary to implement the provisions. Makes other changes. Effective 30 days after becoming law.

Last Action

Date	Chamber	Action
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5/18/201 1	House	Passed Both Houses
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HB 1474

Short Description: HOSPITAL LICENSURE FUND

House Sponsors

Rep. Mary E. Flowers

Synopsis As Introduced

Amends the State Finance Act and the Hospital Licensing Act. Creates the Hospital Licensure Fund, a special fund created in the State treasury. Establishes a \$30 license fee per bed for hospitals applying for a license, provided that a lesser amount may be established by administrative rule of the Department of Public Health, if the Department, in consultation with the Department of Healthcare and Family Services, determines that \$30 per bed would exceed the limitations on health care-related taxes imposed by federal law that, if violated, would result in reductions to the amount of federal financial participation received by the State for Medicaid expenditures. Further provides that the Department shall deposit all fees and fines collected in relation to the licensure of hospitals into the Hospital Licensure Fund for the purpose of providing programs, information, or assistance designed to improve patient safety and quality in hospitals. Effective immediately.

Last Action

Date	Chamber	Action
3/17/201 1	House	Rule 19(a) / Re-referred to Rules Committee

HB 1475

Short Description: INS CD-REMITTANCE PROCEDURES

House Sponsors

Rep. Mary E. Flowers

Synopsis As Introduced

Amends the Illinois Insurance Code. In the provisions concerning remittance advice and procedures and recoupment, provides that no recoupment or offset may be requested or withheld from future payments 60 or more days after the original payment was made. Provides that the provisions concerning administration and enforcement are deemed incorporated into health care professional and health care provider service contracts entered into on or before the effective date of the amendatory Act. Provides that the Director may require an insurance company that issues a policy in willful violation of the Act to pay a penalty in a sum not exceeding \$5,000 (instead of \$1,000). Makes other changes.

Last Action

Date	Chamber	Action
3/17/2011	House	Rule 19(a) / Re-referred to Rules Committee

HB 1476

Short Description: MED PRACTICE ACT-COMPLAINTS

House Sponsors

Rep. Mary E. Flowers-Jack D. Franks-Keith Farnham-Linda Chapa LaVia-Fred Crespo

Senate Sponsors

(Sen. William Delgado)

Synopsis As Introduced

Amends the Medical Practice Act of 1987. Provides that upon any person's request, the Department of Financial and Professional Regulation shall disclose to the person the status of the Disciplinary Board's review of a specific report or

complaint. Provides that the request may be made at any time, including prior to the Disciplinary Board's determination as to whether there are sufficient facts to warrant further investigation or action. Provides that the Department shall, at least 14 days prior to the date set for the hearing, notify in writing any person who filed a complaint against the accused of the time and place for the hearing of the charges against the accused before the Disciplinary Board and inform such person whether he or she may provide testimony at the hearing.

House Committee Amendment No. 1

Provides that the Department of Professional Regulation shall disclose the status of the Disciplinary Board's review of a specific report or complaint to the individual or entity who filed the original report or complaint (rather than any person). Makes other changes.

Last Action

Date	Chamber	Action
5/22/2011	House	Passed Both Houses

HB 1477

Short Description: IDPH-POWER TO LEVY FINES

House Sponsors

Rep. Mary E. Flowers

Synopsis As Introduced

Amends the Department of Public Health Act. In a provision concerning Department powers, provides that the Department may levy a fine on any institution or entity that it licenses or regulates for failing to comply with a lawful order made by the Department or for otherwise violating an Act that the Department has the responsibility of administering. Makes other changes. Effective immediately.

Last Action

Date	Chamber	Action
3/17/2011	House	Rule 19(a) / Re-referred to Rules Committee

HB 1478

Short Description: SCH CD-CHI-HAND WASHING REQ

House Sponsors

Rep. Mary E. Flowers

Synopsis As Introduced

Amends the Chicago School District Article of the School Code. Provides that under the Chicago Board of Education's policies and rules concerning infectious disease, the Board shall require that all students wash their hands with a soap or detergent before consuming any meal at school and shall identify nationally accepted standards from the Centers for Disease Control and Prevention and provide the facilities, materials, and supervision necessary to implement the hand washing requirement. Amends the State Mandates Act to require implementation without reimbursement.

Last Action

Date	Chamber	Action
5/31/2011	House	Rule 19(a) / Re-referred to Rules Committee

HB 1479

Short Description: INS-FEEDING-SUPPLEMENTS

House Sponsors

Rep. Mary E. Flowers

Synopsis As Introduced

Amends the Illinois Insurance Code to provide that accident and health insurance policies and managed care plans must provide coverage for intravenous feeding, prescription nutritional supplements, and hospital patient assessments. Makes corresponding changes in the State Employees Group Insurance Act of 1971, Counties Code, Illinois Municipal Code, School Code, Health Maintenance Organization Act, Voluntary Health Services Plans Act, and Illinois Public Aid Code. Amends the Emergency Medical Treatment Act to provide that every hospital licensed under the Hospital Licensing Act shall comply with the Hospital Emergency Service Act. Amends the Hospital Emergency Service Act to provide that every hospital required to be licensed by the Department of Public Health shall provide a hospital emergency service in accordance with rules and regulations adopted by the Department which shall be consistent with the federal Emergency Medical Treatment and Active Labor Act. Amends the Health Carrier External Review Act. Sets forth provisions concerning standard information for application forms; medical underwriting; the requirement to send to the applicant a copy of the health care service plan contract along with a notice; rescission and cancellation; post contract investigation; and continuation. Makes changes in the provision concerning standard external review. Amends the Medical Patient Rights Act. Provides that each patient has a right to be informed of his or her inpatient or outpatient status. Provides that the statement of a hospital patient's rights shall include the right not to be discriminated against by the hospital and shall provide notice of how to initiate and lodge a grievance regarding improper discrimination. Sets forth provisions concerning discrimination grievance procedures and emergency room antidiscrimination notice. Amends the State Mandates Act to require implementation without reimbursement by the State. Effective immediately.

Last Action

Date	Chamber	Action
3/17/2011	House	Rule 19(a) / Re-referred to Rules Committee

HB 1501

Short Description: INS-CD-PREMIUM RATES

House Sponsors

Rep. Greg Harris-Lisa M. Dugan-Mary E. Flowers-Monique D. Davis, Marlow H. Colvin, Joseph M. Lyons, Cynthia Soto, Naomi D. Jakobsson, Karen May, Constance A. Howard, Linda Chapa LaVia, La Shawn K. Ford, Kelly Burke, Robyn Gabel, Camille Y Lilly, Sara Feigenholtz, Carol A. Sente, Maria Antonia Berrios and Esther Golar

Synopsis As Introduced

Amends the Illinois Insurance Code. Sets forth provisions concerning the filing of premium rates with respect to health insurance coverage offered by a health insurance issuer and premium rate changes. Provides that in addition to filing premium rates, a company shall notify the Director of Insurance whenever a policy form has been closed for sale. Sets forth provisions concerning health insurance premium rates and prior approval of the Director. Contains provisions concerning appeal and requests for actuarial reasoning and data. Makes changes to the provision concerning group accident and health insurance. Amends the Health Maintenance Organization Act. Sets forth provisions concerning premium rates and filing and prior approval. Requires that the schedule of base rates for a group or individual contract or evidence of coverage to be used in conjunction with the contract or evidence of coverage be filed with the Director. Further amends the Act to comport with the provisions of the Illinois Insurance Code concerning health insurance premium rates and prior approval. Effective on January 1, 2012.

Last Action

Date	Chamber	Action
3/17/2011	House	Rule 19(a) / Re-referred to Rules Committee

HB 1528

Short Description: CONTROLLED SUBST-ELECTRONIC RX

House Sponsors

Rep. Lou Lang

Senate Sponsors

(Sen. Heather A. Steans)

Synopsis As Introduced

Amends the Illinois Controlled Substances Act. Makes various changes relating to mid-level practitioner registration. Provides that a prescriber who is otherwise authorized to prescribe controlled substances in Illinois may issue an electronic prescription for Schedule II, III, IV, and V controlled substances if done in accordance with federal rules for electronic prescriptions for controlled substances. Provides that physicians may issue multiple prescriptions (3 sequential 30-day supplies) for the same Schedule II controlled substances authorizing up to a 90-day supply. Makes other changes.

Last Action

Date	Chamber	Action
5/11/2011	Senate	Postponed - Executive

HB 1529

Short Description: INS CD-CONTRACTING-RECOUPMENT

House Sponsors

Rep. Lou Lang

Synopsis As Introduced

Amends the Illinois Insurance Code. Provides that dental insurance plans must list in the fee schedule attached to the contract every Code on Dental Procedures and Nomenclature (CDT) code upon which the plan imposes a capped fee and the dollar amount of the capped fee. Provides that any CDT code not so listed shall not be subject to any fee cap, and the provider may balance bill

the patient. Provides that dental insurance plans must highlight any changes in subsequent contract terms or conditions and shall have the original plan administrator notify the enrolled dentist and allow the dentist sufficient time to respond. Provides that no recoupment or offset may be requested or withheld from future payments 366 or more days after the original payment is made. Provides that no contract between an insurer and a health care professional or health care provider may provide for recoupments in violation of the provision concerning recoupment.

Last Action

Date	Chamber	Action
3/17/2011	House	Rule 19(a) / Re-referred to Rules Committee

HB 1530

Short Description: INSURANCE-MENTAL HEALTH PARITY

House Sponsors

Rep. Lou Lang-Robyn Gabel-William Davis-Naomi D. Jakobsson-Fred Crespo, Dave Winters, Al Riley, Sara Feigenholtz, Mary E. Flowers, Joseph M. Lyons, Maria Antonia Berrios, Jack D. Franks, Keith Farnham, Linda Chapa LaVia, Camille Y Lilly, Cynthia Soto, Ann Williams, Elizabeth Hernandez, John D'Amico, Daniel Biss, Patrick J. Verschoore and Harry Osterman

Senate Sponsors

(Sen. William Delgado, Mattie Hunter, Jeffrey M. Schoenberg-M. Maggie Crotty-Michael Noland, Kimberly A. Lightford, Ira I. Silverstein-Jacqueline Y. Collins, Antonio Muñoz, Emil Jones, III-Don Harmon, James F. Clayborne, Jr., Gary Forby, Terry Link, Dave Syverson, Christine J. Johnson, Kwame Raoul, Iris Y. Martinez and Heather A. Steans)

Synopsis As Introduced

Amends the Illinois Insurance Code in the provisions concerning autism

spectrum disorders, habilitative services for children, and mental and emotional disorders to provide that certain coverage provided under those respective provisions through a group or individual policy of accident and health insurance or managed care plan shall be subject to the parity requirements of the provision concerning mental health parity. Sets forth a provision concerning mental health parity. Provides that every insurer that amends, delivers, issues, or renews a group policy of accident and health insurance in the State providing coverage for hospital or medical treatment and for the treatment of mental, emotional, nervous, or substance use disorders or conditions shall ensure adherence to the provisions concerning financial requirements and treatment limitations. Sets forth provisions concerning aggregate lifetime and annual limits. Amends the Health Maintenance Organization Act to comport with the provision of the Illinois Insurance Code concerning mental health parity. Makes other changes. Effective immediately.

House Committee Amendment No. 1

Changes references of individuals licensed pursuant to the Illinois Alcoholism and Other Drug Abuse and Dependency Act to licensed or certified professionals at programs licensed pursuant to the Illinois Alcoholism and Other Drug Abuse and Dependency Act. Provides that an insurer that provides coverage for hospital or medical expenses under a group policy of accident and health insurance or health care plan shall provide coverage under the policy for treatment of serious mental illness and substance use disorders (instead of serious mental illness). Sets forth a definition for "substance use disorder". Provides that medical necessity determinations for substance use disorders shall be made in accordance with appropriate patient placement criteria established by the American Society of Addiction Medicine. Provides that the provision concerning mental health parity shall be interpreted in a manner consistent with the interim final regulations promulgated by the U.S. Department of Health and Human Services, including the prohibition against applying certain cumulative financial requirements or cumulative quantitative treatment limitations. Makes other changes.

House Floor Amendment No. 3

Changes references from "speech therapist" to "speech-language pathologist".

Senate Floor Amendment No. 3

Replaces everything after the enacting clause. Reinserts the engrossed bill with changes. Removes provisions in the Illinois Insurance Code concerning autism spectrum disorders and habilitative services for children. Provides that the provisions concerning mental health parity do not apply to individual health insurance coverage. Effective immediately.

Last Action

Date	Chamber	Action
5/29/2011	House	Passed Both Houses

HB 1534

Short Description: NURSING HOME-EMPLOYEE INFO

House Sponsors

Rep. Keith Farnham-Karen A. Yarbrough-Jack D. Franks-Linda Chapa LaVia-Carol A. Sente

Senate Sponsors

(Sen. Michael Noland)

Synopsis As Introduced

Amends the Nursing Home Care Act to provide that a facility shall maintain a list of the names, job titles, cities of residence, and dates of employment of all of its employees and shall provide this information to any member of the public upon request. Effective immediately.

House Floor Amendment No. 1

Replaces everything after the enacting clause. Amends the Nursing Home Care Act. Provides that upon the request of a resident representative, a facility shall provide the names and job titles of all employees that had access to a resident, the resident's room, and the resident's financial records in the 30 days preceding an alleged incident that resulted in the filing of a complaint with the Department of Public Health. Provides that the facility shall prepare the list and provide it electronically to the requesting resident representative within 30 days after the filing of the complaint. Adds to the mandated curriculum for training nursing assistants, habilitation aides, and child care aides participation in training each year that assists nursing assistants and habilitation aides in coping with individuals of advanced years who have hearing, memory, physical, and cognitive impairments. Provides that the training shall use a curriculum approved

by the Department of Public Health. Effective immediately.

Senate Committee Amendment No. 1

Provides that a facility shall provide a resident representative with the names and job titles of all employees that had access to a resident, the resident's room, and the resident's financial records in the 30 days preceding an alleged incident that resulted in the filing of a complaint with the Department of Public Health. Provides that the facility shall prepare the list and provide it electronically to the resident representative as soon as possible after the facility is notified of the filing of the complaint.

Last Action

Date	Chamber	Action
5/25/2011	Senate	Held in Public Health

HB 1546

Short Description: DHFS-HOSP-BASED ORGANIZD CLNIC

House Sponsors

Rep. Lisa M. Dugan-Patricia R. Bellock

Synopsis As Introduced

Amends the Illinois Public Aid Code. Requires the Department of Healthcare and Family Services to establish by rule methodologies for payments to hospital-based organized clinics. Sets forth certain requirements clinics must meet in order to qualify for payments, including the requirement that the clinic be adjacent to or on the premises of the hospital and be licensed under the Hospital Licensing Act or the University of Illinois Hospital Act, and the requirement that the clinic have provider-based status under the federal Medicare program. Effective immediately.

Last Action

Date	Chamber	Action
5/31/2011	House	Rule 19(a) / Re-referred to Rules Committee

HB 1577

Short Description: HEALTH BENEFITS EXCHANGE ACT

House Sponsors

Rep. Frank J. Mautino-JoAnn D. Osmond-Sandra M. Pihos-Carol A. Sente and Karen A. Yarbrough

Senate Sponsors

(Sen. William R. Haine)

Synopsis As Introduced

Creates the Illinois Health Benefits Exchange Act. Provides that beginning January 1, 2014 and in accordance with the federal Patient Protection and Affordable Care Act, the State shall establish a State health benefits exchange to be known as the Illinois Health Benefits Exchange in order to help individuals and small employers with no more than 50 employees shop for, select, and enroll in qualified, affordable private health plans. Sets forth provisions concerning Exchange functions, the Legislative Study Committee, Committee studies, and federal action. Repeals the Health Care Justice Act. Effective immediately.

House Committee Amendment No. 2

Provides that the Illinois Health Benefits Exchange Legislative Study Committee is created within the Commission on Government Forecasting and Accountability.

Senate Committee Amendment No. 1

Replaces everything after the enacting clause. Amends Public Act 96-1523 to make the effective date January 1, 2012 (rather than June 1, 2011). Amends the Department of Insurance Law of the Civil Administrative Code of Illinois. Provides that the Department shall study the issue of insurance claims for medical services submitted by nonparticipating facility-based physicians and providers addressed in the provision of the Illinois Insurance Code concerning

nonparticipating facility-based physicians and providers as added by Public Act 96-1523. Sets forth a provision concerning departmental authority. Provides that the Department shall report its findings and recommendations to the General Assembly no later than October 1, 2011. Effective immediately.

Last Action

Date	Chamber	Action
5/27/2011	Senate	Placed on Calendar Order of 3rd Reading May 28, 2011

HB 1662

Short Description: MEDICAID-DETERMINATION STATUS

House Sponsors

Rep. Patricia R. Bellock-Sandra M. Pihos and Al Riley

Senate Sponsors

(Sen. Heather A. Steans-Pamela J. Althoff-Dale A. Righter)

Synopsis As Introduced

Amends the Medical Assistance Article of the Illinois Public Aid Code. Requires the Department of Healthcare and Family Services to conduct an analysis and deliver a report to the General Assembly by January 1, 2012 to evaluate the feasibility of changing Illinois' Medicaid State Plan from 209(b) status to the federal 1634 eligibility determination status for applicable individuals as provided in the Social Security Act. Provides that the report shall include a review of the current standard used by the Department, anticipated fiscal implications of converting to 1634 status, anticipated changes in caseloads resulting from a change to 1634 status, and any additional information deemed relevant by the Department to evaluate the feasibility of converting to 1634 status. Effective immediately.

Last Action

Date	Chamber	Action
5/12/2011	House	Passed Both Houses

HB 1665

Short Description: HOME BIRTH INTEGRATION ACT

House Sponsors

Rep. Robyn Gabel, Thomas Morrison, Maria Antonia Berrios and Dwight Kay

Synopsis As Introduced

Creates the Home Birth Integration Act. Provides that beginning January 1 2013, Illinois hospitals shall implement emergency transfer protocols for home birth patients developed in collaboration with community midwives or their agent. Sets forth the requirements for the protocols. Provides that the Department of Public Health and the Illinois Council of Certified Professional Midwives or their agent shall jointly develop guidelines for the implementation of the Act. Provides that the guidelines shall be communicated to the trauma center medical directors committees and the medical directors committees of each EMS region in this State within 6 months after the effective date of the Act. Sets forth a provision concerning the powers and duties of the Department and rules and vicarious liability. Amends the Medical Practice Act of 1987 and the Nurse Practice Act to exempt community midwives engaged in the transport and transfer of care of home birth mothers or infants in a case of emergency. Makes other changes.

Last Action

Date	Chamber	Action
4/15/2011	House	Rule 19(a) / Re-referred to Rules Committee

HB 1698

Short Description: ADOPT-PUTATIVE FATHER-WAIVER RT

House Sponsors

Rep. John E. Bradley-William Davis-Carol A. Sente-Keith Farnham-Jack D. Franks and Linda Chapa LaVia

Senate Sponsors

(Sen. Kwame Raoul, David Koehler, Mike Jacobs-Donne E. Trotter, Jeffrey M. Schoenberg and Jacqueline Y. Collins)

Synopsis As Introduced

Amends the Adoption Act. Provides a form of waiver of parental rights to be used by a putative or legal father of a born or unborn child.

Senate Floor Amendment No. 3

Replaces everything after the enacting clause. Amends the Department of Central Management Services Law of the Civil Administrative Code of Illinois, the Code of Civil Procedure, and the Workers' Compensation Act. Makes numerous changes concerning the following in relation to workers' compensation: plans by the Department of Central Management Services for State employees, creation of the State Workers' Compensation Program Advisory Board, subpoenas, burden of proof, Commissioner and arbitrator standards of conduct, employee leasing companies, citations, construction employer collective bargaining, negotiated rate, wage differential, preferred provider programs, permanent partial disability, out-of-state fees, fee schedules, electronic claims, utilization review programs, employee intoxication, Commissioner qualifications, the Workers' Compensation Advisory Board, arbitrator appointments, prohibitions on gifts, claims brought by commission employees, carpal tunnel syndrome, fraud, sentencing, advisory premium rates, and insurance oversight. Makes other changes. Contains a severability provision. Effective immediately.

Senate Floor Amendment No. 5

Provides that the Director of the Department of Labor shall adopt a selection process to designate 2 international, national, or statewide organizations made up of affiliates who are the exclusive representative of construction employer employees recognized or certified pursuant to the National Labor Relations Act to participate in the collective bargaining pilot program. Provides that "labor organization" means an affiliate of an international, national, or statewide organization that has been selected by the Department of Labor to participate in the collective bargaining pilot program. Restores certain language regarding an employer's liability to pay for such medical services selected by the employee to the existing law. Changes a cross-reference. Makes changes concerning judicial review.

Last Action

Date	Chamber	Action
5/31/2011	House	Passed Both Houses

HB 1701

Short Description: HEALTH INS EXCHANGE ACT-TECH

House Sponsors

Rep. Arthur Turner

Synopsis As Introduced

Creates the Illinois Health Insurance Exchange Act. Contains only a short title provision.

Last Action

Date	Chamber	Action
5/31/2011	House	Rule 19(a) / Re-referred to Rules Committee

HB 1707

Short Description: CHILD CARE-PERTUSSIS INFO

House Sponsors

Rep. Robyn Gabel-Al Riley-Marlow H. Colvin, Jack D. Franks, Keith Farnham, Carol A. Sente, Linda Chapa LaVia and Camille Y Lilly

Senate Sponsors

(Sen. Mattie Hunter-Jeffrey M. Schoenberg-Michael Noland and William Delgado)

Synopsis As Introduced

Amends the Child Care Act of 1969. Provides that the benefits of immunization against influenza for children 6 months and older and information on pertussis shall be published on the Department's website. Provides that information on the Department's website for influenza and pertussis shall include the incidence and severity of the diseases, the availability of vaccines, and the importance of immunizing persons against pertussis who frequently have close contact with children. Makes other changes. Effective immediately.

Senate Floor Amendment No. 1

Replaces everything after the enacting clause with the engrossed bill with changes to the provision concerning immunization against vaccine preventable diseases, including influenza and pertussis. Effective immediately.

Last Action

Date	Chamber	Action
5/28/2011	House	Passed Both Houses

HB 1825

Short Description: INS-CANCER-DRUG-CLINIC TRIAL

House Sponsors

Rep. Ann Williams-Patricia R. Bellock-Chapin Rose-Elizabeth Hernandez-William Davis, Angelo Saviano, Jim Durkin, Al Riley, Mary E. Flowers, Dennis M.

Reboletti, Franco Coladipietro, Kelly Burke, Deborah Mell, Robert Rita, Joseph M. Lyons, John D'Amico, Greg Harris, David R. Leitch, Sara Feigenholtz, Jack D. Franks, Luis Arroyo, Carol A. Sente, Jack McGuire, Edward J. Acevedo, Michael P. McAuliffe, Maria Antonia Berrios, Rita Mayfield, Keith P. Sommer, Monique D. Davis, Lisa M. Dugan, Michael J. Zalewski, Mike Fortner, Michael W. Tryon, Daniel Biss, Sandra M. Pihos, William Cunningham, Susana A. Mendoza, Sandy Cole, Fred Crespo, Chris Nybo, Emily McAsey, Thaddeus Jones, Robyn Gabel, Camille Y Lilly, Ed Sullivan, Jr. and Kay Hatcher

Senate Sponsors

(Sen. Heather A. Steans-Mattie Hunter-David Koehler, Pamela J. Althoff, Suzi Schmidt-Susan Garrett, Edward D. Maloney-Antonio Muñoz, Michael Noland, William Delgado, M. Maggie Crotty, Linda Holmes, Dale A. Righter, John O. Jones, Jeffrey M. Schoenberg, Toi W. Hutchinson, Jacqueline Y. Collins, Dan Duffy, Darin M. LaHood, Ron Sandack, Dan Kotowski, Terry Link, Kirk W. Dillard, Ira I. Silverstein, Christine J. Johnson and Martin A. Sandoval)

Synopsis As Introduced

Amends the Illinois Insurance Code. Provides that accident and health insurance policies that provide coverage for prescribed orally-administered cancer medications and intravenously administered or injected cancer medications shall ensure that the applicable financial requirements and treatment limitations are no more restrictive than the financial requirements and treatment limitations applied to intravenously administered or injected cancer medications that are covered by the policy. Provides that an insurer cannot achieve compliance with the coverage mandate by increasing financial requirements or imposing more restrictive treatment limitations on prescribed orally-administered cancer medications or intravenously administered or injected cancer medications covered under the policy. Effective immediately.

Senate Floor Amendment No. 1

Deletes the effective date provision.

Last Action

Date	Chamber	Action
5/28/2011	House	Passed Both Houses

HB 1919

Short Description: ULTRASOUND OPPORTUNITY ACT

House Sponsors

Rep. Brandon W. Phelps-David Reis-Joe Sosnowski-Thomas Morrison-Randy Ramey, Jr., Richard Morthland, Wayne Rosenthal, Lisa M. Dugan, Dwight Kay, John D. Cavaletto, Michael G. Connelly, Adam Brown, Monique D. Davis and Jill Tracy

Synopsis As Introduced

Creates the Ultrasound Opportunity Act. Sets forth legislative findings and definitions. Provides that at any facility where abortions are performed the physician who is to perform the abortion, the referring physician, or another qualified person working in conjunction with either physician shall offer any woman seeking an abortion after 6 weeks of gestation an opportunity to receive and view an active ultrasound of her unborn child by someone qualified to perform ultrasounds at the facility, or at a facility listed in a listing of local ultrasound providers provided by the facility, at least one hour prior to the woman having any part of an abortion performed or induced, and prior to the administration of any anesthesia or medication in preparation for the abortion. Provides that the Department of Public Health shall prepare and make available a reporting form, to be submitted by each abortion facility to the Department annually. Provides that the requirements of the Act shall not apply when, in the medical judgment of the physician performing or inducing the abortion, there exists a medical emergency. Contains a severability provision. Effective immediately.

Last Action

Date	Chamber	Action
3/17/2011	House	Rule 19(a) / Re-referred to Rules Committee

HB 1929

Short Description: CD CORR-MEDICAL-INMATE CO-PAY

House Sponsors

Rep. Emily McAsey-Michael Unes

Senate Sponsors

(Sen. A. J. Wilhelmi-Dale A. Righter)

Synopsis As Introduced

Amends the Unified Code of Corrections. Increases from \$2 to \$5 the co-payment that a person committed to the Department of Corrections who is not otherwise exempt from the payment must pay to the Department for each visit for medical or dental services on a non-emergency basis.

Senate Floor Amendment No. 1

Provides that for the purpose of exempting a committed person who is indigent from the co-payment for non-emergency medical or dental services only, defines "indigent" as a committed person who has \$20 or less in his or her Inmate Trust Fund at the time of such services or for the 30 days prior to such services.

Last Action

Date	Chamber	Action
5/29/2011	House	Passed Both Houses

HB 1946

Short Description: PRISONER&STAFF TRAINING ED HIV

House Sponsors

Rep. Monique D. Davis and Linda Chapa LaVia

Synopsis As Introduced

Amends the Unified Code of Corrections. Provides that the Department of Corrections shall annually train all employees on universal precautions for the

prevention of transmission of HIV, hepatitis, and other infections transmitted by contact with blood or bodily fluids. Provides that all institutions and facilities of the Department of Corrections shall operate a program to educate inmates about the transmission, prevention and treatment of HIV/AIDS, sexually transmitted infections, and viral hepatitis, and other chronic health and wellness topics as determined by the Department. Provides that all institutions and facilities of the Department shall permit a committed person to possess and use condoms. Provides that a committed person may not be denied any privileges or good conduct credit because of the person's purchase, possession, or use of condoms. Provides that neither the Department nor an institution or facility of the Department may declare condoms as contraband, although the Department may limit the number of condoms in unopened, original packaging that an inmate may possess at any one time. Provides that by January 1, 2012 the Department shall develop a plan to make condoms available at no cost according to established public health practices and in a manner that protects the health, safety and privacy of committed person and correctional facility staff, and such plan may include vending machines.

Last Action

Date	Chamber	Action
3/17/2011	House	Rule 19(a) / Re-referred to Rules Committee

HB 1961

Short Description: SCHOOL INFLUENZA VACCINATION

House Sponsors

Rep. Daniel J. Burke

Synopsis As Introduced

Creates the School Influenza Vaccination Act. Sets forth legislative findings. Provides that the Department of Public Health shall apply for federal grants and appropriations under the federal Patient Protection and Affordable Care Act (PPACA) to fund, build infrastructure, promote, and expand school-located vaccination programs to provide seasonal influenza vaccinations for school-age

children. Sets forth sources from which the Department shall seek grant and appropriations. Provides that the Department shall make information regarding federal grants and appropriations opportunities under PPACA available to certain agencies. Effective on July 1, 2011.

Last Action

Date	Chamber	Action
3/17/2011	House	Rule 19(a) / Re-referred to Rules Committee

HB 2028

Short Description: PHARMACY ACT-DIABETIC SHOES

House Sponsors

Rep. Dan Reitz

Synopsis As Introduced

Amends the Pharmacy Practice Act. Defines "pharmacist clinician", "prescriptive authority" and "appropriately trained". Provides that a pharmacist clinician shall have on file at his or her place of practice written guidelines and protocols authorizing prescriptive authority. Provides that the guidelines and protocols authorizing prescriptive authority shall include a statement (i) identifying the practitioner authorized to prescribe and the pharmacist clinician who is a party to the guidelines or protocol, (ii) of the types of decisions a pharmacist clinician is authorize to make, (iii) of the activities the pharmacist clinician is to follow in the course of exercising prescriptive authority, and (iv) that describes appropriate mechanisms for reporting to the practitioner monitoring activities and results. Provides that claims of professional superiority in filling prescriptions or in any manner implying professional superiority that may reduce the public confidence in the ability, character, or integrity of other pharmacies or pharmacists are unlawful. Provides restrictions in advertising. Makes other changes. Effective immediately.

Last Action

Date	Chamber	Action
3/17/2011	House	Rule 19(a) / Re-referred to Rules Committee

HB 2093

Short Description: DCFS-CHILD ABUSE-REQUIRED RPTS

House Sponsors

Rep. David Reis-Dwight Kay-John D. Cavaletto-Michael Unes-Darlene J. Senger, Monique D. Davis and Thomas Morrison

Senate Sponsors

(Sen. William R. Haine)

Synopsis As Introduced

Amends the Abused and Neglected Child Reporting Act. Extends the list of persons required to report child abuse or neglect to include any physician, physician's assistant, registered nurse, licensed practical nurse, medical technician, certified nursing assistant, social worker, licensed professional counselor, office personnel, or volunteer of any office, clinic, or any other physical location that provides abortions, abortion counseling, abortion referrals, contraceptives, contraceptive counseling, sex education, or gynecological care and services.

House Floor Amendment No. 3

Replaces everything after the enacting clause. Reinserts similar provisions, but with the following changes: Provides that any physician, physician's assistant, registered nurse, licensed practical nurse, medical technician, certified nursing assistant, social worker, or licensed professional counselor of any office, clinic, or any other physical location (rather than any physician, physician's assistant, registered nurse, licensed practical nurse, medical technician, certified nursing assistant, social worker, licensed professional counselor, office personnel, or volunteer of any office, clinic, or any other physical location) that provides abortions, abortion referrals, or contraceptives (rather than that provides abortions, abortion counseling, abortion referrals, contraceptives, contraceptive counseling, sex education, or gynecological care and services) having

reasonable cause to believe a child known to him or her in his or her professional or official capacity may be an abused child or a neglected child shall immediately report or cause a report to be made to the Department of Children and Family Services. Adds language providing that any office, clinic, or any other physical location that provides abortions, abortion referrals, or contraceptives shall provide to all office personnel copies of written information and training materials about abuse and neglect and the requirements of this Act that are provided to employees of the office, clinic, or physical location who are required to make reports to the Department under this Act, and instruct such office personnel to bring to the attention of an employee of the office, clinic, or physical location who is required to make reports to the Department under this Act any reasonable suspicion that a child known to him or her in his or her professional or official capacity may be an abused child or a neglected child.

Last Action

Date	Chamber	Action
5/12/2011	House	Passed Both Houses

HB 2917

Short Description: CONTROLLED SUBSTANCES-DISPENSE

House Sponsors

Rep. Barbara Flynn Currie-Lou Lang and Jim Durkin

Senate Sponsors

(Sen. Don Harmon-Jacqueline Y. Collins)

Synopsis As Introduced

Amends the Illinois Controlled Substances Act. Changes defined terms. Makes numerous changes relating to the scheduling, prescribing, and dispensing of controlled substances. Changes the list of anabolic steroids. Adds various substances to the Schedules. Permits an authorized prescriber to issue electronic prescriptions for Schedule II through V controlled substances if done in accordance with federal rules. Makes changes relating to the Prescription

Monitoring Program; combines the Schedule II and Schedule III through V monitoring programs into a single program. Defines and prohibits medication shopping and pharmacy shopping. Makes other substantive and technical changes. Effective January 1, 2012.

House Committee Amendment No. 1

Changes references from "civil fine" to "fine". Eliminates reference to the Prescription Monitoring Program in association with its Advisory Committee and the Department of Financial and Professional Regulation in relation to possible erroneous association of prescriptions to any licensed prescriber or end user. Provides that nothing in the Act shall be construed to limit the authority of a hospital pursuant to the Nurse Practice Act to grant hospital clinical privileges to an individual advanced practice nurse to select, order or administer medications, including controlled substances to provide services within a hospital. Nothing in this Act shall be construed to limit the authority of an ambulatory surgical treatment center pursuant to the Nurse Practice Act to grant ambulatory surgical treatment center clinical privileges to an individual advanced practice nurse to select, order or administer medications, including controlled substances to provide services within an ambulatory surgical treatment center.

House Floor Amendment No. 2

Deletes from the definition of "controlled substance" a drug or other substance, or immediate precursor, included in schedule I, II, III, IV, or V of 21 U.S.C. 352 (part B). Provides that an electronic prescription for a Schedule II, III, IV, or V controlled substance may be issued if done in accordance with the federal rules for electronic prescriptions, as amended. Provides that: a Chief of Investigations of the Department of Financial and Professional Regulation's Division of Professional Regulation appointed by the Secretary of Financial and Professional Regulation on or after the effective date of the amendatory Act is a conservator of the peace and as such has all the powers possessed by policemen in municipalities and by sheriffs, except that he or she may exercise such powers anywhere in the State; and any other employee of the Department of Financial and Professional Regulation appointed by the Secretary of Financial and Professional Regulation or by the Director of Professional Regulation on or after the effective date of the amendatory Act is not a conservator of the peace.

Last Action

Date	Chamber	Action
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5/17/201 1	House	Passed Both Houses
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HB 2940

Short Description: HOME BIRTH SAFETY ACT

House Sponsors

Rep. Robyn Gabel

Synopsis As Introduced

Creates the Home Birth Safety Act. Provides for the licensure of midwives by the Department of Financial and Professional Regulation. Creates the Illinois Midwifery Board. Sets forth provisions concerning qualifications, grounds for disciplinary action, and administrative procedures. Amends the Regulatory Sunset Act to set a repeal date for the new Act of January 1, 2022. Amends the Medical Practice Act of 1987 and the Nurse Practice Act to make related changes. Effective January 1, 2012.

Last Action

Date	Chamber	Action
3/17/201 1	House	Rule 19(a) / Re-referred to Rules Committee

HB 2978

Short Description: NURSE ACT-PRESCRIBE SCHED II

House Sponsors

Rep. John E. Bradley

Synopsis As Introduced

Amends the Nurse Practice Act. Provides that a collaborating physician or

podiatrist may, but is not required to, delegate prescriptive authority to an advanced practice nurse as part of a written collaborative agreement of Schedule II (instead of III) through V controlled substances. Effective immediately.

Last Action

Date	Chamber	Action
3/17/2011	House	Rule 19(a) / Re-referred to Rules Committee

HB 3031

Short Description: DHFS-MEDICAID-PROVIDER CONTRAC

House Sponsors

Rep. Jim Durkin

Synopsis As Introduced

Amends the Medical Assistance Article of the Illinois Public Aid Code. Provides that the Department of Healthcare and Family Services shall require third-party providers that administer any portion of the medical assistance program to conduct, on a random sampling basis, an annual analysis of the enrollees under their authority. Requires all requests for proposals and associated third-party provider contracts issued by the Department to include a statement notifying third-party providers of this requirement. Effective immediately.

Last Action

Date	Chamber	Action
3/17/2011	House	Rule 19(a) / Re-referred to Rules Committee

HB 3134

Short Description: DPH-ADVANCE DIRECTIVE INFO

House Sponsors

Rep. Sara Feigenholtz-Robyn Gabel

Senate Sponsors

(Sen. Kwame Raoul)

Synopsis As Introduced

Amends the Department of Public Health Powers and Duties Law of the Civil Administrative Code of Illinois in the provision concerning advance directive information. Provides that the Department of Public Health shall publish the Department of Public Health Uniform DNR Advance Directive form in Spanish and that the form shall meet the minimum requirements to nationally be considered a physician orders for life-sustaining treatment form. Makes other changes.

Last Action

Date	Chamber	Action
5/18/2011	House	Passed Both Houses

HB 3156

Short Description: AMBULAT SURG TRTMT CNTR-ABORTN

House Sponsors

Rep. Darlene J. Senger-Thomas Morrison-Richard Morthland and Michael G. Connelly

Synopsis As Introduced

Amends the Ambulatory Surgical Treatment Center Act. Provides that

notwithstanding any other statute, rule, or regulation to the contrary, an ambulatory surgical treatment center where abortions are performed must comply with all of the statutes, rules, and regulations applicable to ambulatory surgical treatment centers generally.

House Committee Amendment No. 1

Replaces everything after the enacting clause with the bill as introduced and the following changes. Provides that notwithstanding any other statute, rule, or regulation to the contrary, beginning on January 1, 2015, an ambulatory surgical treatment center where abortions are performed and any other facility where 50 or more abortions are performed in any calendar year must comply with all of the statutes, rules, and regulations applicable to ambulatory surgical treatment centers generally (instead of notwithstanding any other statute, rule, or regulation to the contrary, an ambulatory surgical treatment center where abortions are performed must comply with all of the statutes, rules, and regulations applicable to ambulatory surgical treatment centers generally). Provides that if any such ambulatory surgical treatment center commences any construction or major alteration on or after the effective date of the amendatory Act but before January 1, 2015, then the requirements prescribed by the amendatory Act shall apply.

Land Conveyance Appraisal Note, House Committee Amendment No. 1 (Dept. of Transportation)

No land conveyances are included in this bill.

Pension Note, House Committee Amendment No. 1 (Government Forecasting & Accountability)

HB 3156 (H-AM 1) will not impact any public pension fund or retirement system in Illinois.

State Debt Impact Note, House Committee Amendment No. 1 (Government Forecasting & Accountability)

HB 3156 (H-AM 1) would not change the amount of authorization for any type of State-issued or State-supported bond, and, therefore, would not affect the level of State indebtedness.

Fiscal Note (Dept. of Public Health)

HB 3156 will have a fiscal impact on the Department of Public Health estimated in the amount of \$73,608.00.

State Mandates Fiscal Note, House Committee Amendment No. 1 (Dept. of Commerce & Economic Opportunity)

HB 3156 (H-AM 1) does create a State mandate.

Home Rule Note, House Committee Amendment No. 1 (Dept. of Commerce & Economic Opportunity)

HB 3156 (H-AM 1) does not pre-empt home rule authority.

Balanced Budget Note, House Committee Amendment No. 1 (Office of Management and Budget)

HB 3156 (H-AM 1) fiscal impact is unknown at this time and will be dependent upon the number of, if any, regulatory complaints that would be received if this legislation becomes law.

Judicial Note, House Committee Amendment No. 1 (Admin Office of the Illinois Courts)

Would neither increase nor decrease the number of judges needed in the state.

Fiscal Note, House Committee Amendment No. 1 (Dept. of Public Health)

Estimated fiscal impact on the Department of Public Health in the amount of \$135,000.

Housing Affordability Impact Note, House Committee Amendment No. 1 (Housing Development Authority)

This bill will have no effect on the cost of constructing, purchasing, owning, or selling a single-family residence.

Correctional Note, House Committee Amendment No. 1 (Dept of Corrections)

This legislation has no fiscal or population impact on the Department of Corrections.

Last Action

Date	Chamber	Action
4/15/2011	House	Rule 19(a) / Re-referred to Rules Committee

HB 3166

Short Description: HEALTH COURTS

House Sponsors

Rep. Michael G. Connelly-Dwight Kay

Synopsis As Introduced

Creates the Health Courts Act. Establishes the Illinois Health Courts Commission with 10 members appointed by the Governor, by and with the consent of the Senate, of which: 3 are representatives of hospitals; 3 are representatives of physicians; and 4 are citizen representatives, with one designated as chairman by the Governor. Provides for the staffing and the operation of the Commission. Establishes arbitrator qualifications, appointments and training procedures. Provides that arbitrators are subject to the Personnel Code. Provides that the Commission shall adopt rules to create an alternative dispute resolution method that provides: after the occurrence of an adverse health care event, the health care professional or health care provider involved must notify the patient or the patient's family, within 30 days after the discovery of the adverse event, that the patient has a right to seek compensation; following this, the patient may submit a claim; the health care professional or provider must notify the health court commission of the claim and provide a compensability determination to the patient within 60 days; if the event is compensable, the health care professional or provider must make an offer based upon a schedule of damages created by the Commission by rule; a patient may appeal that compensation decision to the Commission; the patient may appeal a decision to not compensate the patient for the claim, which is reviewed by an arbitrator, de novo, at a hearing at which the health care professional or provider and the patient may present evidence, including expert testimony; and the arbitrator's decision may be appealed to the appellate court. Provides that the Commission shall issue an annual report. Includes other provisions.

Last Action

Date	Chamber	Action
3/17/2011	House	Rule 19(a) / Re-referred to Rules Committee

HB 3206

Short Description: HEALTH CARE SERVICE LIEN-INS

House Sponsors

Rep. André M. Thapedi

Synopsis As Introduced

Amends the Health Care Services Lien Act. Provides that the total of all liens under the Act, including insurer reimbursement claims, (instead of all liens under the Act) shall not exceed 40% of a verdict, judgment, or settlement. Provides that a petition by an injured person or a health care provider to adjudicate the rights including liens of all interested parties may be served on interested parties by personal service, substitute service, or registered or certified mail. Provides that the Act applies to all insurers and their reimbursement claims and rights. Provides that if a patient provides his or her health insurance information to a health care professional or health care provider, the professional or provider is required to submit health care charges to the identified insurer and that the failure to do so voids the professional's or provider's lien and bars any collection action directly against the injured person. Limits the professional's or provider's lien to 66% of the charges that would have been submitted had the charge been presented to the insurer. Makes related changes.

Last Action

Date	Chamber	Action
3/17/2011	House	Rule 19(a) / Re-referred to Rules Committee

HB 3236

Short Description: HEALTH BENEFIT PURCHASING COOP

House Sponsors

Rep. Karen May-Sara Feigenholtz-Kenneth Dunkin-Carol A. Sente-Barbara Flynn Currie, Karen A. Yarbrough, Robert Rita, Naomi D. Jakobsson, Esther Golar, Elaine Nekritz, Greg Harris, Jack D. Franks, Keith Farnham, Linda Chapa LaVia, Franco Coladipietro, Deborah Mell, Dan Reitz, Robyn Gabel, Al Riley, Harry Osterman, William Cunningham, André M. Thapedi, Lou Lang, Constance A. Howard, Rita Mayfield, La Shawn K. Ford, Lisa M. Dugan, Dave Winters, Maria Antonia Berrios, Michael J. Zalewski, Emily McAsey, Daniel Biss, Marlow H. Colvin, William D. Burns, Susana A. Mendoza, Elizabeth Hernandez, John E. Bradley, Patricia R. Bellock, Camille Y Lilly, Cynthia Soto, Kevin A. McCarthy, William Davis, Fred Crespo, Kay Hatcher, Chapin Rose, Dennis M. Reboletti,

Roger L. Eddy, Michelle Mussman, Michael P. McAuliffe, Sandy Cole, Thomas Holbrook, Patrick J. Verschoore, Brandon W. Phelps, Jehan A. Gordon, Dwight Kay, Luis Arroyo, Arthur Turner, Derrick Smith, Ann Williams, Anthony DeLuca, Kelly Burke, Michael W. Tryon, John D'Amico and Sidney H. Mathias

Senate Sponsors

(Sen. Jeffrey M. Schoenberg-Susan Garrett)

Synopsis As Introduced

Amends the Co-operative Act. Provides that health benefit purchasing cooperatives may be organized by one or more persons in geographic areas designated by the Director of the Department of Insurance. Provides guidance for the design of a health benefit purchasing cooperative. Provides guidance for establishing member criteria and requires a cooperative to file the criteria and other reports with the Director of the Department of Insurance. Provides that each health benefit purchasing cooperative shall be organized on a membership basis with no capital stock. Provides that the contract between the health benefit purchasing cooperative and an insurer shall be for a term of 3 years. Effective immediately.

House Committee Amendment No. 1

Replaces everything after the enacting clause. Amends the Illinois Insurance Code. Provides that in addition to all other provisions of the Article of the Code concerning domestic mutual companies, a company seeking to organize as a health care cooperative shall meet certain requirements. Sets forth provisions concerning (1) the naming of companies seeking to organize as health care cooperatives and (2) application requirements to do business as a health care cooperative. Amends the Co-operative Act. Exempts domestic mutual insurance companies licensed as a health care cooperative by the Director of Insurance from the prohibition against using the term "Co-operative" as part of a corporate or other business name or title without complying with the provisions of the Co-operative Act. Provides that health benefit purchasing cooperatives may be organized by one or more persons in geographic areas designated by the Director of the Department of Insurance. Provides guidance for the design of a health benefit purchasing cooperative. Provides guidance for establishing member criteria and requires a cooperative to file the criteria and other reports with the Director of the Department of Insurance. Provides that each health benefit purchasing cooperative shall be organized on a membership basis with no capital stock. Provides that the contract between the health benefit purchasing cooperative and an insurer shall be for a term of 3 years. Effective immediately.

Last Action

Date	Chamber	Action
5/16/2011	Senate	Postponed - Insurance

HB 3263

Short Description: HEALTHCARE - SEX CRIMES

House Sponsors

Rep. Patricia R. Bellock

Synopsis As Introduced

Amends the Department of Professional Regulation Law of the Civil Administrative Code of Illinois. Provides that when the Secretary receives notification from an Illinois State's Attorney of the filing of criminal charges alleging that a health care worker, as defined in the Health Care Worker Self-Referral Act, committed any offense that (1) involves bodily harm against a patient, including any offense based on sexual conduct or sexual penetration or (2) requires as a part of its criminal sentence to register under the Sex Offender Registration Act, the Secretary shall suspend the license of the health care worker without a hearing for 45 days, simultaneously with the institution of proceedings for a hearing. Adds provisions concerning disciplinary hearings and confidentiality. Provides that the Department shall immediately permanently revoke the license or permit of any health care worker who has been convicted of such a crime and that the Department shall not reinstate or issue a license or permit as a health care worker to any such convicted person unless that person's conviction has been vacated, overturned, or reversed. Provides that these new provisions apply notwithstanding any other provision of law to the contrary. Amends the Counties Code. Adds to the duties of State's Attorney the duty to: (1) notify the Department of the filing of criminal charges alleging that a health care worker committed any offense that (i) involves bodily harm against a patient, including any offense based on sexual conduct or sexual penetration or (ii) requires as a part of its criminal sentence to register under the Sex Offender Registration Act and (2) notify the Department upon the conviction of any health care worker of such a crime. Effective immediately.

Last Action

Date	Chamber	Action
3/17/2011	House	Rule 19(a) / Re-referred to Rules Committee

HB 3352

Short Description: MEDICAL PRACTICE ACT

House Sponsors

Rep. Dan Reitz

Synopsis As Introduced

Amends the Medical Practice Act of 1987 to reenact certain provisions of Public Act 94-677, which was declared to be unconstitutional. Includes explanatory, validation, and severability provisions. Makes certain changes relating to the reenactment. Amends the Regulatory Sunset Act. Extends the repeal date of the Medical Practice Act of 1987 from November 30, 2011 until December 31, 2021. Further amends the Medical Practice Act of 1987. Makes changes in provisions concerning definitions; civil penalties for unlicensed practice; exemptions; the Medical Disciplinary Board; the Complaint Committee; the Medical Licensing Board; matters concerning advanced practice nurses; applications for licenses; criminal background checks; education standards; temporary licenses; visiting professor, physician, or resident permits; licensure without examination; continuing education; license renewal and fees; disciplinary action; reports related to professional conduct and capacity; license suspension; advertising; purchasing and dispensing legend drugs; hearing officers; hearings and notice; disclosure of information; reports of the Disciplinary Board's findings and recommendations; certification of record; prima facie proof; restoration of licenses; authority of the Director and the Department; criminal penalties; and public nuisances. Repeals a Section of the Medical Practice Act of 1987 concerning the practice of medicine by persons licensed in any other state who have applied to the Department for a license to practice medicine in all of its branches. Makes other changes. Effective immediately.

Last Action

Date	Chamber	Action
3/17/2011	House	Rule 19(a) / Re-referred to Rules Committee

HB 3425

Short Description: MID-AMERICA MEDICAL DIST

House Sponsors

Rep. Thomas Holbrook-Eddie Lee Jackson, Sr.-Patrick J. Verschoore-Ron Stephens

Senate Sponsors

(Sen. James F. Clayborne, Jr.-Kyle McCarter)

Synopsis As Introduced

Amends the Mid-America Medical District Act. Expands the boundaries of the Mid-America Medical District to include the corporate boundaries of the City of Belleville. Provides for the appointment of 3 additional members to the Mid-America Medical District Commission. Provides that the new members shall be appointed by the Mayor of the City of Belleville with the advice and consent of the corporate authorities of the City of Belleville. Adds to the purposes of the Mid-America Medical District Commission convening dialogue among leaders in the public and the private sectors on topics and issues associated with training in the delivery of health care services within the District's program area. Authorizes the Mid-America Medical District Commission to issue revenue bonds. Sets forth the requirements for issuing revenue bonds. Effective immediately.

House Committee Amendment No. 1

Replaces everything after the enacting clause. Reinserts the introduced bill with changes. Removes provisions concerning eminent domain powers. Effective immediately.

Senate Committee Amendment No. 1

Further amends the Mid-America Medical District Act. Expands the boundaries of the Mid-America Medical District to include the corporate boundaries of the City of O'Fallon. Provides for the appointment of 3 additional

members to the Mid-America Medical District Commission who shall be appointed by the Mayor of the City of O'Fallon with the advice and consent of the corporate authorities of the City of O'Fallon. Sets forth the terms the commissioners appointed by the Mayor shall serve.

Last Action

Date	Chamber	Action
5/31/2011	House	Passed Both Houses

HB 3434

Short Description: HOSP PATIENT DISCOUNT-AMOUNT

House Sponsors

Rep. Ann Williams

Synopsis As Introduced

Amends the Hospital Uninsured Patient Discount Act. Makes changes to the definition for "uninsured patient". In the provision concerning uninsured patient discounts, provides that the discount shall apply and the maximum collectible amount shall not apply to a patient who would otherwise be considered to be uninsured and eligible for a discount under the Act, except for the patient being eligible for compensation for health care services under the Crime Victims Compensation Act. Provides that a hospital that accepts payment for health care services under the Crime Victims Compensation Act on behalf of an otherwise uninsured crime victim shall be required to waive the remaining patient balance for that service and may not pursue the patient for any additional payment for the service. Makes changes in the provision concerning patient responsibility. Provides that the changes made by the amendatory Act are intended to be declarative of existing law. Effective immediately.

Last Action

Date	Chamber	Action
4/15/2011	House	Rule 19(a) / Re-referred to Rules Committee

HB 3547

Short Description: MEDICAID-PROVIDER FRAUD

House Sponsors

Rep. Mary E. Flowers

Synopsis As Introduced

Amends the Public Assistance Fraud Article of the Illinois Public Aid Code. Provides that providers and suppliers of healthcare services under the State's medical assistance program shall be screened by the Department of Healthcare and Family Services prior to being accepted by the State as service providers. Contains provisions concerning screening measures; payment audits; and mandatory compliance plans.

Last Action

Date	Chamber	Action
3/17/2011	House	Rule 19(a) / Re-referred to Rules Committee

HB 3549

Short Description: AMBULAT SURGICAL CNTR-HOSPITAL

House Sponsors

Rep. Mary E. Flowers

Synopsis As Introduced

Amends the University of Illinois Hospital Act, the Ambulatory Surgical Treatment Center Act, and the Hospital Licensing Act. Provides that whenever an ambulatory surgical treatment center or hospital provides treatment to a patient

that involves placement of bone, an organ, other human tissue, or any foreign object, including, but not limited to, artificial joints and other prostheses, into the patient's body, the ambulatory surgical treatment center or hospital must fully disclose at least the following to the patient: the source of the bone, organ, other human tissue, or foreign object; the date it was obtained; the date it was placed in the patient; and the location of the placement in the patient's body. Effective immediately.

Last Action

Date	Chamber	Action
3/17/2011	House	Rule 19(a) / Re-referred to Rules Committee

HB 3550

Short Description: FIRE DEPT-EXAM REVIEW SESSIONS

House Sponsors

Rep. Monique D. Davis-Derrick Smith

Senate Sponsors

(Sen. Edward D. Maloney-Larry K. Bomke-Donne E. Trotter)

Synopsis As Introduced

Amends the Fire Department Promotion Act. Provides that review sessions held after an examination has been given for the purpose of gathering feedback from candidates shall be at no cost to the candidates. Effective immediately.

Last Action

Date	Chamber	Action
5/17/2011	House	Passed Both Houses

HB 3717

Short Description: \$DHFS-TECH

House Sponsors

Rep. Michael J. Madigan-Sara Feigenholtz

Senate Sponsors

(Sen. Heather A. Steans)

Synopsis As Introduced

Appropriates \$2 from the General Revenue Fund to the Department of Healthcare and Family Services for its FY12 ordinary and contingent expenses. Effective July 1, 2011.

House Committee Amendment No. 1

Replaces everything after the enacting clause. Makes appropriations to various agencies. Effective July 1, 2011.

House Floor Amendment No. 3

Further amends the bill by changing appropriations and adding an appropriation.

Last Action

Date	Chamber	Action
5/30/2011	House	Passed Both Houses

SB 6

Short Description: CIGARETTE TAX- INCREASE

Senate Sponsors

Sen. John J. Cullerton

Synopsis As Introduced

Amends the Cigarette Tax Act and the Cigarette Use Tax Act. Provides that an additional tax of 38 mills per cigarette is imposed beginning March 1, 2011. Provides that an additional tax of 12.5 mills per cigarette is imposed beginning

March 1, 2012. Provides that proceeds from the additional taxes shall be deposited into the Long-Term Care Provider Fund and the Fund for the Advancement of Education. Amends the State Finance Act to create the Fund for the Advancement of Education. Provides that retailers and distributors who have stamped cigarettes in their possession when the additional tax takes effect are not required to pay the additional tax on those stamped cigarettes, except that retailers and distributors are required to pay the additional tax to the extent the average monthly volume of cigarette stamps in the retailer or distributor's possession exceeds the average monthly volume of cigarette stamps purchased by the retailer or distributor in the previous calendar year. Allows distributors to make payment for tax stamps by draft, which shall be payable within 10 days after purchase. Amends the Tobacco Products Tax Act. Provides that moist snuff is considered a tobacco product. Provides that the tax is imposed on moist snuff at the rate of \$0.20 per ounce.

Last Action

Date	Chamber	Action
1/27/2011	Senate	Referred to Assignments

SB 56

Short Description: DRUG OVERDOSE IMMUNITY

Senate Sponsors

Sen. Ira I. Silverstein, Annazette R. Collins and Mattie Hunter

Synopsis As Introduced

Amends the Alcoholism and Other Drug Abuse and Dependency Act. Provides that the Director of the Division of Alcoholism and Substance Abuse of the Department of Human Services shall (rather than may) establish or authorize programs for prescribing, dispensing, or distributing naloxone hydrochloride or any other similarly acting and equally safe drug approved by the U.S. Food and Drug Administration for the treatment of drug overdose. Amends the Cannabis Control Act, the Illinois Controlled Substances Act, and the Methamphetamine Control and Community Protection Act. Provides that a person acting in good faith who seeks medical assistance for someone experiencing a drug-related overdose or a person who experiences a drug-related overdose and is in need of medical assistance shall not be charged or prosecuted for possession of cannabis, a controlled or counterfeit substance or a controlled substance analog, or methamphetamine if the evidence for the charge of possession of cannabis, a controlled or counterfeit substance or a controlled substance analog, or

methamphetamine was obtained as a result of the person seeking medical assistance. Amends the Unified Code of Corrections. Provides that it is a mitigating factor in sentencing that the defendant was making a good faith effort to obtain or provide medical assistance for someone who is experiencing a drug-related overdose. Makes other changes.

Last Action

Date	Chamber	Action
3/18/2011	Senate	Rule 3-9(a) / Re-referred to Assignments

SB 123

Short Description: DAYCARE LICENSES-90 DAY MAX

Senate Sponsors

Sen. Heather A. Steans-Martin A. Sandoval

House Sponsors

(Rep. Daniel J. Burke)

Synopsis As Introduced

Amends the Child Care Act of 1969. Provides that the Department shall have a maximum of 90 days after the date of submission of any child care facility license application to determine the status of the application.

House Committee Amendment No. 2

Replaces everything after the enacting clause. Creates the Public Health Standing Orders Act. Provides that public health standing orders, also referred to as standing physician protocols, issued pursuant to the Act shall contain, at the minimum, certain elements. Provides that health care personnel may provide medical services within a public health clinic in conformance with standing orders issued by a public health standing orders physician without prior establishment of a physician-patient relationship between the public health standing orders physician and the person receiving medical services. Sets forth a provision concerning standing orders or protocols as implemented by hospitals. Amends the Local Governmental and Governmental Employees Tort Immunity Act. Makes changes in the provision concerning definitions. Changes a certain reference from "standing orders" to "public health standing orders". Provides that the

changes apply only to causes of actions accruing on or after the effective date of the amendatory Act.

Last Action

Date	Chamber	Action
5/31/2011	Senate	Passed Both Houses

SB 127

Short Description: ILLINOIS FAMILY MEDICAL LEAVE

Senate Sponsors

Sen. Martin A. Sandoval

Synopsis As Introduced

Creates the Illinois Family and Medical Leave Act. Contains provisions similar to those in the federal Family and Medical Leave Act of 1993, except that it applies to a son-in-law, daughter-in-law, father-in-law, mother-in-law, domestic partner, or sibling who has a serious health condition, increases the leave allowed to 16 workweeks, and some of the provisions of the federal law pertaining to federal employees, federal matters, and the 2008 amendments have been omitted or changed. Contains provisions concerning applicability and coordination. Effective 6 months after becoming law.

Last Action

Date	Chamber	Action
4/8/2011	Senate	Rule 3-9(a) / Re-referred to Assignments

SB 128

Short Description: HEALTHY WORKPLACE ACT

Senate Sponsors

Sen. Martin A. Sandoval

Synopsis As Introduced

Creates the Healthy Workplace Act. Requires an employer to provide an employee up to 7 sick days with pay during each 12-month period. Provides that an employee may use the sick days care for physical or mental illness, injury, medical condition, professional medical diagnosis or care, or a medical appointment of the employee or a family member. Contains provisions regarding: accrual; certification; notice; responsibilities of employers; unlawful practices; powers and duties of the Department of Labor; violations; penalties; civil liability; severability; and other matters.

Last Action

Date	Chamber	Action
4/8/2011	Senate	Rule 3-9(a) / Re-referred to Assignments

SB 140

Short Description: INTERVENTIONAL PAIN ACT

Senate Sponsors

Sen. Iris Y. Martinez, Mike Jacobs and Dave Syverson

Synopsis As Introduced

Creates the Interventional Pain Medicine Act. Defines "interventional pain medicine", "interventional techniques", and other related terms. Provides that a person shall not practice or offer to practice interventional techniques for pain medicine in this State unless such person is a physician licensed to practice medicine in all its branches. Provides that a violation is a Class A misdemeanor. Provides that interventional techniques may not be delegated. Permits the performance of noninvasive or nonsurgical procedures by a licensed chiropractic physician or licensed physical therapist in accordance with the law or the performance of nonsurgical pain care and treatment authorized by the statutory scope of practice for other licensed health care workers or delegated by a physician licensed to practice medicine in all its branches. Effective July 1, 2011.

Last Action

Date	Chamber	Action
3/18/2011	Senate	Rule 3-9(a) / Re-referred to Assignments

SB 145

Short Description: NURSING HM-INFECTION CONTROL

Senate Sponsors

Sen. Heather A. Steans-William Delgado-Martin A. Sandoval-Mattie Hunter-Jacqueline Y. Collins and Michael Noland

House Sponsors

(Rep. Sara Feigenholtz-Al Riley-Derrick Smith-Kenneth Dunkin and Rita Mayfield)

Synopsis As Introduced

Amends the Nursing Home Care Act. Provides that a skilled nursing facility shall designate a person or persons as Infection Prevention and Control Professionals to develop and implement policies governing control of infections and communicable diseases. Provides that the Infection Prevention and Control Professional's qualifications shall be documented and shall be made available for inspection by the Department of Public Health. Effective on January 1, 2012.

House Committee Amendment No. 2

Replaces everything after the enacting clause. Creates the Specialized Mental Health Rehabilitation Act and amends the Nursing Home Care Act. Provides that all long-term care facilities for the mentally ill shall be licensed by the Department of Public Health under the Specialized Mental Health Rehabilitation Act instead of under the Nursing Home Care Act. Makes the provisions in the Specialized Mental Health Rehabilitation Act substantially the same as those in the Nursing Home Care Act. Amends various Acts to make conforming changes. Amends the Illinois Act on the Aging and the Criminal Identification Act to include certain references to the MR/DD Community Care Act. Amends the MR/DD Community Care Act. Makes changes and additions with regard to provisions concerning medical treatment and records; drug treatment; unlawful discrimination; right to notification of violations; screening

prior to admission; criminal history reports; disclosure of information; notice of imminent death, unusual incident, abuse, or neglect; notification of violations; minimum staffing; licensure; ban on new admissions; standards; care plans; curricula; inspection; various violations and penalties; and protocols. Amends the Hospital Licensing Act and the Nursing Home Administrators Licensing and Disciplinary Act to include certain references to the MR/DD Community Care Act. Makes other changes. Includes a nonacceleration provision. Effective immediately.

House Committee Amendment No. 3

Makes a change in the provision of the Specialized Mental Health Rehabilitation Act concerning payments to facilities to provide that any change in rate methodology shall be made in statute. Further amends the MR/DD Community Care Act. Provides that a facility shall promptly notify (rather than only notify) the coroner or medical examiner of a resident's death. Further amends the Hospital Licensing Act. Provides that every hospital shall promptly report the death of a person known to be a resident (rather than every hospital shall, as soon as possible, but no longer than 24 hours later, report the death of a person known to be a resident).

House Floor Amendment No. 4

Deletes the changes to the definition of "neglect" in the MR/DD Community Care Act.

Correctional Note, House Committee Amendment No. 2 (Dept of Corrections)

The penalty enhancements associated with SB 145 (H-AM 2) would have a minimal fiscal and population impact on the Department.

Correctional Note, House Committee Amendment No. 3 (Dept of Corrections)

The penalty enhancements associated with SB 145 (H-AM 3) would have a minimal fiscal and population impact on the Department.

Land Conveyance Appraisal Note, House Committee Amendment No. 2 (Dept. of Transportation)

No land conveyances are included in this bill; therefore, there are no appraisals to be filed.

Land Conveyance Appraisal Note, House Committee Amendment No. 3 (Dept. of Transportation)

No land conveyances are included in this bill; therefore, there are no appraisals to be filed.

Fiscal Note, House Committee Amendment No. 1 (Dept. of Public Health)

There is no additional cost associated with regulating facilities under the Specialized Mental Health Rehabilitation Facilities Act, instead of the Nursing Home Care Act. Costs associated with additional time needed for inspections of facilities licensed under the MRDD Community Care Act based on higher standards pursuant to SB 145 are difficult to estimate at this time. Any such costs will be offset by funds generated from the currently authorized assessment on facilities licensed under the MRDD Community Care Act.

Fiscal Note, House Committee Amendment No. 2 (Dept. of Public Health)

There is no additional cost associated with regulating facilities under the Specialized Mental Health Rehabilitation Facilities Act, instead of the Nursing Home Care Act. Costs associated with additional time needed for inspections of facilities licensed under the MRDD Community Care Act based on higher standards pursuant to SB 145 are difficult to estimate at this time. Any such costs will be offset by funds generated from the currently authorized assessment on facilities licensed under the MRDD Community Care Act.

State Debt Impact Note, House Committee Amendment No. 2 (Government Forecasting & Accountability)

This legislation would not change the amount of authorization for any type of State-issued or State-supported bond, and, therefore, would not affect the level of State indebtedness.

State Debt Impact Note, House Committee Amendment No. 3 (Government Forecasting & Accountability)

This legislation would not change the amount of authorization for any type of State-issued or State-supported bond, and, therefore, would not affect the level of State indebtedness.

State Mandates Fiscal Note, House Committee Amendment No. 2 (Dept. of Commerce & Economic Opportunity)

This bill does not create a State mandate.

State Mandates Fiscal Note, House Committee Amendment No. 3 (Dept. of Commerce & Economic Opportunity)

This bill does not create a State mandate.

Home Rule Note, House Committee Amendment No. 2 (Dept. of Commerce & Economic Opportunity)

This bill does not pre-empt home rule authority.

Home Rule Note, House Committee Amendment No. 3 (Dept. of Commerce & Economic Opportunity)

This bill does not pre-empt home rule authority.

Fiscal Note (Dept. of Healthcare & Family Services)

The five facilities covered under SB 145 would no longer pay the assessment required of facilities under the NHCA resulting in a loss of approximately \$749,000. Under SB 145, these facilities will have their Medicaid rate cut by \$1.00 per day resulting in a savings to the department of approximately \$500,000. The net annual fiscal impact to the Department of Healthcare and Family Services (DHS) is approximately \$235,000, which HFS had already budgeted through the assessment.

Fiscal Note, House Committee Amendment No. 2 (Dept. of Public Health)

There is no additional cost associated with regulating facilities under the Specialized Mental Health Rehabilitation Facilities Act, instead of the Nursing Home Care Act. Costs associated with additional time needed for inspections of facilities licensed under the MRDD Community Care Act based on higher standards pursuant to SB 145 are difficult to estimate at this time. Any such costs will be offset by funds generated from the currently authorized assessment on facilities licensed under the MRDD Community Care Act.

Fiscal Note, House Committee Amendment No. 3 (Dept. of Public Health)

There is no additional cost associated with regulating facilities under the Specialized Mental Health Rehabilitation Facilities Act, instead of the Nursing Home Care Act. Costs associated with additional time needed for inspections of facilities licensed under the MRDD Community Care Act based on higher standards pursuant to SB 145 are difficult to estimate at this time. Any such costs will be offset by funds generated from the currently authorized assessment on facilities licensed under the MRDD Community Care Act.

Balanced Budget Note, House Committee Amendment No. 2 (Office of Management and Budget)

There is no additional cost associated with regulating facilities under the Specialized Mental Health Rehabilitation Facilities Act, instead of the Nursing Home Care Act. Costs associated with additional time needed for inspections of facilities licensed under the MRDD Community Care Act based on higher standards pursuant to SB 145 are difficult to estimate at this time. Any such costs will be offset by funds generated from the currently authorized assessment on facilities licensed under the MRDD Community Care Act.

Balanced Budget Note, House Committee Amendment No. 3 (Office of Management and Budget)

There is no additional cost associated with regulating facilities under the Specialized Mental Health Rehabilitation Facilities Act, instead of the Nursing Home Care Act. Costs associated with additional time needed for inspections of facilities licensed under the MRDD Community Care Act based on higher standards pursuant to SB 145 are difficult to estimate at this time. Any such costs will be offset by funds generated from the currently authorized assessment on facilities licensed under the MRDD Community Care Act.

Pension Note, House Committee Amendment No. 2 (Government Forecasting & Accountability)

SB 145 (H-AM 2) will have no fiscal impact on any pension funds or retirement systems in Illinois.

Pension Note, House Committee Amendment No. 3 (Government Forecasting & Accountability)

SB 145 (H-AM 3) will have no fiscal impact on any pension funds or retirement systems in Illinois.

State Mandates Fiscal Note, House Committee Amendment No. 2 (Dept. of Commerce & Economic Opportunity)

This bill does not create a State mandate.

State Mandates Fiscal Note, House Committee Amendment No. 3 (Dept. of Commerce & Economic Opportunity)

This bill does not create a State mandate.

Housing Affordability Impact Note, House Committee Amendment No. 2 (Housing Development Authority)

This bill will have no effect on the cost of constructing, purchasing, owning, or selling a single-family residence.

Housing Affordability Impact Note, House Committee Amendment No. 3 (Housing Development Authority)

This bill will have no effect on the cost of constructing, purchasing, owning, or selling a single-family residence.

Judicial Note (Admin Office of the Illinois Courts)

This bill would neither increase nor decrease the number of judges needed in the State.

Last Action

Date	Chamber	Action
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5/31/2011	Senate	Passed Both Houses
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SB 1234

Short Description: MENTL HLTH MEDICATION RECORDS

Senate Sponsors

Sen. Mattie Hunter

House Sponsors

(Rep. Sara Feigenholtz-Elaine Nekritz-Robert W. Pritchard)

Synopsis As Introduced

Amends the Mental Health and Developmental Disabilities Confidentiality Act. Provides that a person, institution, or agency that maintains a recipient's pharmaceutical records and communications regarding pharmaceuticals may disclose those records and communications, along with related payment records, to any medical practitioner who is providing medical care to the recipient. Effective immediately.

Senate Floor Amendment No. 1

Deletes everything after the enacting clause. Amends the Mental Health and Developmental Disabilities Confidentiality Act. Provides that for purposes of treatment and coordination of care, State agencies, including the Department of Corrections, county jails, insurance companies, and integrated health systems, may disclose records of a recipient without the recipient's consent, if the recipient is in a program administered or operated by the Department of Healthcare and Family Services or the Department of Human Services to hospitals, physicians, therapists, emergency medical personnel and members of an interdisciplinary team treating a recipient with or without the recipient's consent. Provides that providers on an interdisciplinary care team treating a recipient may disclose the recipient's records without the recipient's consent to other members of the team. Provides that the records that may be disclosed are services rendered, providers rendering the services, pharmaceuticals prescribed or dispensed, and diagnoses. Provides that all disclosures must be made in a manner consistent with the federal Health Insurance Portability and Accountability Act (HIPAA). Effective immediately.

House Committee Amendment No. 1

Replaces everything after the enacting clause with provisions substantially similar to the bill except it provides: that for a recipient in a program operated or administered by the Department of Healthcare and Family Services or the Department of Human Services, the recipient's records may be disclosed without consent by county jails, insurance companies, integrated health systems, and State agencies (instead of county jails, insurance companies, and State agencies) to hospitals, physicians, therapists, emergency medical personnel, and members of an interdisciplinary team treating a recipient for the purposes of treatment and coordination of care; this type of disclosure must be consistent with existing federal and State laws and regulations and HIPAA (instead of consistent with HIPAA); and definitions of "integrated health system" and "interdisciplinary team". Effective immediately.

Last Action

Date	Chamber	Action
5/27/2011	Senate	Passed Both Houses

SB 1248

Short Description: NURSING HM-AUTHENTICATION

Senate Sponsors

Sen. Michael W. Frerichs

House Sponsors

(Rep. Naomi D. Jakobsson-Monique D. Davis-Al Riley and Keith Farnham)

Synopsis As Introduced

Amends the Nursing Home Care Act. Provides that all physician's orders and plans of treatment shall have the authentication of the physician and that "authentication" means an original written signature or an electronic signature system that allows for the verification of a signer's credentials. Provides that a stamp signature, with or without initials, is not sufficient.

Last Action

Date	Chamber	Action
6/2/2011	Senate	Sent to the Governor

SB 1338

Short Description: CD CORR-EARLY RELEASE-NOTICE

Senate Sponsors

Sen. Kirk W. Dillard

House Sponsors

(Rep. Rita Mayfield)

Synopsis As Introduced

Amends the Unified Code of Corrections. Provides that the Department of Corrections shall establish uniform procedures for providing timely advance notice of early release of inmates to law enforcement in local jurisdictions and shall submit a report to the General Assembly, by January 1, 2012, of those notice procedures. Provides that the 14-day advance notice of early release of an inmate because of the award of good conduct credit for meritorious service shall be provided to the Governor and sheriff of the county where the prosecution took place. Effective immediately.

Senate Floor Amendment No. 1

Deletes provision that if the Department of Corrections is to release an inmate earlier than it would because of a grant of good conduct credit for meritorious service, the Department must give notice not less than 14 days prior to the date of release to the Governor.

Last Action

Date	Chamber	Action
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5/31/2011	House	Rule 19(a) / Re-referred to Rules Committee
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SB 1350

Short Description: TRUTH IN HEALTH CARE-COVERAGE

Senate Sponsors

Sen. Kyle McCarter, William R. Haine, William Delgado and Dave Syverson

House Sponsors

(Rep. Angelo Saviano, David Harris and Patricia R. Bellock)

Synopsis As Introduced

Amends the Truth in Health Care Professional Services Act. Provides that health care professionals and licensee as defined in the Truth in Health Care Professional Services Act applies to individuals who work in a hospital or in an ambulatory surgical treatment center as defined by the Ambulatory Surgical Treatment Center Act. Effective immediately.

Senate Committee Amendment No. 1

Replaces everything after the enacting clause. Amends the Truth in Health Care Professional Services Act. Provides that "health care professional" does not include an individual licensed as a dentist. Effective immediately.

Last Action

Date	Chamber	Action
5/11/2011	Senate	Passed Both Houses

SB 1354

Short Description: DPH-MOBILE ASTHMA PILOT PROGRAM

Senate Sponsors

Sen. Jeffrey M. Schoenberg

Synopsis As Introduced

Amends the Department of Public Health Powers and Duties Law of the Civil Administrative Code of Illinois. Establishes the Asthma Mobile Pilot Program, and provides that, subject to appropriations, the Department of Public Health shall issue a grant for the program. Provides that the 5-year pilot program shall include: initial respiratory health screenings; diagnosis and follow-up medical care from pediatricians specializing in asthma management; bilingual, individualized family education sessions; in-home asthma trigger assessments; Covering All Kids Insurance Program application assistance; and extensive primary care physician outreach and education. Requires the grant recipient to collect certain data. Requires the Department to submit an annual report to the General Assembly. Effective July 1, 2011.

Last Action

Date	Chamber	Action
3/18/2011	Senate	Rule 3-9(a) / Re-referred to Assignments

SB 1363

Short Description: COVERING ALL KIDS-CITIZENSHIP

Senate Sponsors

Sen. Wm. Sam McCann

Synopsis As Introduced

Amends the Covering ALL KIDS Health Insurance Act. Provides that to be eligible for benefits under the Act, an individual who is otherwise eligible must be either a United States citizen or included in one of certain specified categories of non-citizens. Provides that the Department of Healthcare and Family Services may, by rule, cover prenatal care or emergency medical care for non-citizens who are not otherwise eligible under these provisions. Provides that nothing in these provisions affects the eligibility status of a child enrolled in the program on the effective date of the amendatory Act. Effective immediately.

Last Action

Date	Chamber	Action
3/18/2011	Senate	Rule 3-9(a) / Re-referred to Assignments

SB 1377

Short Description: LONG TERM ACUTE CARE HOSPITALS

Senate Sponsors

Sen. Christine Radogno

House Sponsors

(Rep. La Shawn K. Ford)

Synopsis As Introduced

Amends the Emergency Medical Services (EMS) Systems Act in the provision concerning emergency Department classifications to provide that long-term acute care hospitals, as defined under the Hospital Emergency Services Act, are not required to provide hospital emergency services and shall be classified as not available. Amends the Hospital Emergency Services Act. Provides an exception for long-term acute care hospitals from the requirement that certain hospitals shall provide a hospital emergency service. Provides that general acute care hospitals designated by Medicare as long-term acute care hospitals are not required to provide the hospital emergency services required by the Act. Provides that such hospitals may provide hospital emergency services at their option.

Senate Floor Amendment No. 1

Amends the Long Term Acute Care Hospital Quality Improvement Transfer Program Act to include in the definition of "LTAC hospital" a hospital that begins operations after January 1, 2009 (instead of 2010) and is designated by Medicare as a long term acute care hospital.

House Committee Amendment No. 1

Amends the Hospital Emergency Service Act. Provides that any hospital defined in the provision concerning long-term acute care hospitals that opts to discontinue emergency services shall comply with all provisions of the federal Emergency Medical Treatment and Labor Act (EMTALA) and the Social Security

Act, provide annual notice to communities about available emergency medical services, and make educational materials available concerning the availability of medical services within the hospital's service area.

Last Action

Date	Chamber	Action
5/31/2011	House	Rule 19(a) / Re-referred to Rules Committee

SB 1378

Short Description: DEATH CERTIFICATE-MRSA

Senate Sponsors

Sen. Christine Radogno-Susan Garrett and Mattie Hunter

Synopsis As Introduced

Amends the Vital Records Act. Provides that the person responsible for completing the medical certification of cause of death for a death certificate must note the presence of Methicillin-resistant staphylococcus aureus if it is a contributing factor to or the cause of death. Effective immediately.

Last Action

Date	Chamber	Action
3/18/2011	Senate	Rule 3-9(a) / Re-referred to Assignments

SB 1388

Short Description: MED PRACT-SUNSET-EXAM-REENACT

Senate Sponsors

Sen. Michael W. Frerichs

Synopsis As Introduced

Amends the Regulatory Sunset Act. Extends the repeal date of the Medical Practice Act of 1987 from November 30, 2011 to January 1, 2021. Also includes revisory changes. Amends the Medical Practice Act of 1987. Provides that in determining what action to take or whether to proceed with prosecution of a complaint, the Complaint Committee shall consider any recommendation made by the Department. Sets forth criteria that the Licensing Board may consider in making a determination of professional capacity, and makes other changes concerning professional capacity. Makes a change concerning a visiting professor permit. Changes references from "licensure without examination" to "licensure by endorsement". Makes a change concerning requiring an examination. Adds specific requirements for mental and physical examinations required by the Licensing Board or Disciplinary Board, and authorizes a substance abuse or sexual offender evaluation. Changes the reporting requirements for State's Attorneys. Allows the disclosure of certain confidential information to a medical licensing authority of another state or jurisdiction in certain instances. Repeals a Section concerning the practice of medicine by persons licensed in any other state who have applied for a license to practice medicine in this State. Makes other changes. Also reenacts certain provisions of Public Act 94-677, which was declared to be unconstitutional; includes explanatory and validation provisions. Effective immediately.

Last Action

Date	Chamber	Action
4/8/2011	Senate	Rule 3-9(a) / Re-referred to Assignments

SB 1540

Short Description: MEDICAL PRACTICE ACT

Senate Sponsors

Sen. Iris Y. Martinez

Synopsis As Introduced

Amends the Medical Practice Act of 1987 to reenact certain provisions of Public Act 94-677, which was declared to be unconstitutional. Includes explanatory, validation, and severability provisions. Makes certain changes

relating to the reenactment. Amends the Regulatory Sunset Act. Extends the repeal date of the Medical Practice Act of 1987 from November 30, 2011 until December 31, 2021. Further amends the Medical Practice Act of 1987. Makes changes in provisions concerning definitions; civil penalties for unlicensed practice; exemptions; the Medical Disciplinary Board; the Complaint Committee; the Medical Licensing Board; matters concerning advanced practice nurses; applications for licenses; criminal background checks; education standards; temporary licenses; visiting professor, physician, or resident permits; licensure without examination; continuing education; license renewal and fees; disciplinary action; reports related to professional conduct and capacity; license suspension; advertising; purchasing and dispensing legend drugs; hearing officers; hearings and notice; disclosure of information; reports of the Disciplinary Board's findings and recommendations; certification of record; prima facie proof; restoration of licenses; authority of the Director and the Department; criminal penalties; and public nuisances. Repeals a Section of the Medical Practice Act of 1987 concerning the practice of medicine by persons licensed in any other state who have applied to the Department for a license to practice medicine in all of its branches. Makes other changes. Effective immediately.

Senate Committee Amendment No. 1

Replaces everything after the enacting clause. Reinserts the introduced bill with changes. Makes changes to provisions concerning the Medical Disciplinary Board; the Medical Licensing Board; physician licensed to practice without drugs and operative surgery, license for general practice; temporary license; licensure without examination; disciplinary action; and the provision concerning those authorized to purchase legend drugs. Provides that nothing in this Act shall be construed to limit the method of delegation that may be authorized by any means, including, but not limited to, oral, written, electronic, standing orders, protocols, guidelines, or verbal orders. Makes other technical changes. Effective immediately.

Last Action

Date	Chamber	Action
4/6/2011	Senate	Placed on Calendar Order of 2nd Reading April 7, 2011

SB 1545

Short Description: INS CD-CONTRACTING-RECOUPMENT

Senate Sponsors

Sen. William R. Haine

Synopsis As Introduced

Amends the Illinois Insurance Code. Provides that dental insurance plans must list in the fee schedule attached to the contract every Code on Dental Procedures and Nomenclature (CDT) code upon which the plan imposes a capped fee and the dollar amount of the capped fee. Provides that any CDT code not so listed shall not be subject to any fee cap, and the provider may balance bill the patient. Provides that dental insurance plans must highlight any changes in subsequent contract terms or conditions and shall have the original plan administrator notify the enrolled dentist and allow the dentist sufficient time to respond. Provides that no recoupment or offset may be requested or withheld from future payments 366 or more days after the original payment is made. Provides that no contract between an insurer and a health care professional or health care provider may provide for recoupments in violation of the provision concerning recoupment.

Senate Committee Amendment No. 1

Replaces everything after the enacting clause. Amends the Illinois Insurance Code. Makes a technical change in a Section concerning the short title.

Last Action

Date	Chamber	Action
4/8/2011	Senate	Placed on Calendar Order of 3rd Reading April 11, 2011

SB 1548

Short Description: MEDICAL CANNABIS PROGRAM

Senate Sponsors

Sen. William R. Haine

Synopsis As Introduced

Creates the Compassionate Use of Medical Cannabis Pilot Program Act. Provides that the Department of Public Health shall issue a registry identification card to a qualified patient with a debilitating medical condition that allows the patient to possess no more than 2 ounces of dried usable cannabis and 6 cannabis plants, no more than 3 of which can be mature cannabis plants. Provides for the registration by the Department of Public Health of medical cannabis organizations to dispense cannabis to qualified patients and caregivers. Contains provisions regarding: prohibitions and penalties; discrimination; addition of debilitating conditions or treatments; determinations; notifications; registration of compassion centers and safety compliance facilities; confidentiality; verification; reports; rules; educational materials; enforcement; and other matters. Provides that the Act is repealed 3 years after its effective date. Amends the Cannabis Control Act to repeal provisions relating to research with cannabis. Contains a severability provision.

Senate Committee Amendment No. 1

Replaces everything after the enacting clause. Amends the Cannabis Control Act. Makes a technical change in a Section concerning the short title.

Last Action

Date	Chamber	Action
3/15/2011	Senate	Placed on Calendar Order of 2nd Reading March 16, 2011

SB 1549

Short Description: HEALTH BENEFITS EXCHANGE ACT

Senate Sponsors

Sen. William R. Haine and Dave Syverson

Synopsis As Introduced

Creates the Illinois Health Benefits Exchange Act. Provides that beginning January 1, 2014 and in accordance with the federal Patient Protection and Affordable Care Act, the State shall establish a State health benefits exchange to be known as the Illinois Health Benefits Exchange in order to help individuals and small employers with no more than 50 employees shop for, select, and enroll in qualified, affordable private health plans. Sets forth provisions concerning

Exchange functions, the Legislative Study Committee, Committee studies, and federal action. Repeals the Health Care Justice Act. Effective immediately.

Senate Committee Amendment No. 2

Replaces everything after the enacting clause. Creates the Illinois Health Benefits Exchange Act. Contains only a short title provision.

Last Action

Date	Chamber	Action
4/8/2011	Senate	Placed on Calendar Order of 3rd Reading April 11, 2011

SB 1555

Short Description: INS CD-RELIGIOUS ORG EXEMPT

Senate Sponsors

Sen. William R. Haine

House Sponsors

(Rep. Frank J. Mautino-Monique D. Davis-Mary E. Flowers)

Synopsis As Introduced

Amends the Illinois Insurance Code in the provision concerning classes of insurance to provide that the insurance laws of this State, including the Illinois Insurance Code, do not apply to a religious organization or members of the organization when the organization meets certain criteria.

Senate Committee Amendment No. 1

Provides that the insurance laws of the State, including the Illinois Insurance Code, do not apply to arrangements between a religious organization and the organization's members or participants (instead of to a religious organization or members of the organization) when the arrangement and organization meet (instead of the organization meets) certain criteria.

House Floor Amendment No. 2

Replaces everything after the enacting clause. Creates the Illinois Health Benefits Exchange Law. Provides that beginning October 1, 2013 and in accordance with the federal Patient Protection and Affordable Care Act, the State shall establish a State health benefits exchange to be known as the Illinois Health Benefits Exchange in order to help individuals and small employers with no more than 50 employees shop for, select, and enroll in qualified, affordable private health plans. Sets forth provisions concerning Exchange functions, the Department of Insurance's and the Commission on Governmental Forecasting and Accountability's authority, the Legislative Study Committee, Committee studies, and federal action. Creates the State Employee Health Savings Account Law. Provides that, beginning in taxable year 2011, each employer shall make available to each eligible individual a health savings account program. Provides that an employer shall deposit \$2,750 annually into an eligible individual's health savings account. Provides that a trustee or custodian must use the funds held in a health savings account solely (i) for the purpose of paying the qualified medical expenses of the eligible individual or his or her dependents, (ii) to purchase a health coverage policy, certificate, or contract, or (iii) to pay for health insurance other than a Medicare supplemental policy for those who are Medicare eligible. Repeals the Health Care Justice Act. Effective immediately.

Last Action

Date	Chamber	Action
5/29/2011	Senate	Passed Both Houses

SB 1557

Short Description: GRP INS-PHYS THERAPY-COVERAGE

Senate Sponsors

Sen. William R. Haine

House Sponsors

(Rep. Michael J. Madigan-Esther Golar)

Synopsis As Introduced

Amends the State Employees Group Insurance Act of 1971. Provides that there is coverage under the Act for medically necessary physical therapy and

occupational therapy when that therapy is ordered for the treatment of autoimmune diseases or referred for the same purpose (rather than at any time medically necessary physical therapy and occupational therapy is ordered or referred). Effective immediately.

Senate Committee Amendment No. 1

Removes a provision that required the provider of physical or occupational therapy to furnish certain records in order to establish that initial or continued treatment is resulting in an approved clinical status.

Last Action

Date	Chamber	Action
5/30/2011	Senate	Passed Both Houses

SB 1591

Short Description: MEDICAID-BASIC HEALTH PROGRAM

Senate Sponsors

Sen. Antonio Muñoz

Synopsis As Introduced

Amends the Medicaid Revenue Act. Requires the Department of Healthcare and Family Services, in accordance with the federal Patient Protection and Affordable Care Act, to establish a Basic Health Program within its existing Medicaid managed care and care coordination programs in order to help serve the health care needs of individuals earning between 133% and 200% of the federal poverty level. Provides that the Department shall ensure full implementation of the Basic Health Program by January 1, 2014 and shall take all necessary steps to ensure that the State of Illinois is eligible for, and receives, the enhanced federal matching funds available to serve this currently underserved population.

Last Action

Date	Chamber	Action
3/18/2011	Senate	Rule 3-9(a) / Re-referred to Assignments

SB 1616

Short Description: NURSE-COLLABORATION-PRESCRIBE

Senate Sponsors

Sen. Heather A. Steans

Synopsis As Introduced

Amends the Nurse Practice Act. Removes references to a written collaborative agreement throughout the Act. Provides that an advanced practice nurse's scope of practice includes collaboration and consultation with or referral to a physician or other appropriate health-care professional for patient care needs that exceed the APN's scope of practice, education, or experience. Provides that as part of the professional scope of advanced practice nursing, an advanced practice nurse possesses prescriptive authority appropriate to his or her specialty, scope of practice, education, and experience. Such prescriptive authority shall include the authority to prescribe, select, order, administer, store, accept samples of, and dispense over-the-counter medications, legend drugs, medical gases, certain controlled substances, and other preparations, including botanical and herbal remedies. Amends various other Acts to make related changes. Effective immediately.

Last Action

Date	Chamber	Action
3/18/2011	Senate	Rule 3-9(a) / Re-referred to Assignments

SB 1619

Short Description: SCH CD-INSTRUCTION-ABSTINENCE

Senate Sponsors

Sen. Heather A. Steans-Iris Y. Martinez, Emil Jones, III-David Koehler, Jeffrey M. Schoenberg-William Delgado, Mattie Hunter, Toi W. Hutchinson, Donne E. Trotter, Kimberly A. Lightford, Ira I. Silverstein, Susan Garrett, Michael Noland and Linda Holmes

Synopsis As Introduced

Creates the Personal Responsibility Education Program Act. Provides that if an elementary or secondary public school offers sex education or sexual health education, the education must be medically accurate and developmentally and age appropriate and must include instruction regarding the benefits of delaying or abstaining from sexual activity. Requires school districts to make curriculum and course materials available for viewing upon request. Provides that a pupil must be excused for any part of the instruction at the written request of his or her parent or guardian. Provides that a pupil must not be subject to disciplinary action, an academic penalty, or any other sanction if the pupil's parent or guardian requests in writing that the pupil not receive the instruction. Requires the Department of Human Services to adopt rules; specifies requirements for the rules. With respect to teen pregnancy prevention and sexual health education, requires this State, through the appropriate State agency or department, to seek available funds from the federal government allocated to evidenced-based teen pregnancy prevention programs. Amends the School Code to make changes concerning sex education course material and instruction requirements. Amends the Critical Health Problems and Comprehensive Health Education Act to replace references from "abstinence until marriage" to "abstinence" in a Section setting forth what areas the comprehensive health education program must include.

Senate Committee Amendment No. 1

Deletes everything after the enacting clause. Amends the School Code and the Critical Health Problems and Comprehensive Health Education Act. Provides that each class or course in comprehensive sex education offered in any of grades 6 through 12 shall include instruction on both abstinence and contraception for the prevention of pregnancy and sexually transmitted diseases, including HIV/AIDS (instead of instruction on the prevention, transmission, and spread of AIDS). Removes a provision that requires all public elementary, junior high, and senior high school classes that teach sex education and discuss sexual intercourse to emphasize that abstinence is the expected norm. Provides that all public elementary, junior high, and senior high school classes that teach sex education and discuss sexual intercourse shall satisfy specified criteria (instead of all sex education courses that discuss sexual intercourse shall satisfy specified criteria); makes changes to that criteria. Provides that an opportunity shall be

afforded to individuals (not just parents or guardians) to examine the instructional materials to be used in the class or course. Provides that the State Board of Education shall make available resource materials for educating children regarding sex education and may take into consideration the curriculum on this subject developed by other states, as well as any other curricular materials suggested by education experts and other groups that work on sex education issues. Provides that materials may include without limitation model sex education curriculums and sexual health education programs. Requires the State Board to make these resource materials available on its Internet website. Allows school districts to adapt such programs to the specific needs of their communities. Provides that the Comprehensive Health Education Program shall include the educational area of evidence-based and medically accurate information regarding sexual abstinence (instead of the area of sexual abstinence until marriage).

Senate Floor Amendment No. 2

Provides that the requirement that class material and instruction place substantial emphasis on abstinence include the option of abstinence until marriage. Provides that school districts that do not currently provide sex education are not required to teach sex education. Provides that if a sex education class or course is offered in any of grades 6 through 12, the school district may choose and adapt the developmentally and age-appropriate, medically accurate, evidence-based, and complete sex education curriculum that meets the specific needs of its community (instead of providing that school districts may adapt programs to the specific needs of their communities).

Last Action

Date	Chamber	Action
5/3/2011	Senate	Placed on Calendar - Consideration Postponed May 4, 2011

SB 1627

Short Description: ASIAN BODYWORK THERAPY ACT

Senate Sponsors

Sen. Heather A. Steans

Synopsis As Introduced

Creates the Asian Bodywork Therapy Licensing Act. Beginning January 1, 2012, provides that it is unlawful for a person to act or assume to act as an Asian bodywork therapist, to engage in the business of Asian bodywork therapy, or to advertise or hold himself or herself out to be a licensed Asian bodywork therapist without first obtaining a license issued by the Department. Creates the Asian Bodywork Therapy Licensing Board. Allows the Department to take action, including imposing fines not to exceed \$1,000 per violation, if the individual meets the requirements for grounds for disciplinary action. Grants the Department authority to petition the Attorney General or local State's Attorney office where a violation occurs to enjoin the violation or order enforcement compliance with the Act. Provides that, on a showing of a possible violation, the Department may compel an applicant or a licensee to submit to a physical or mental examination. Sets forth the powers and duties of the Department, license qualifications, grounds for discipline, civil and criminal penalties, and administrative procedures. Sets forth provisions concerning standards of practice and prohibited activities. Preempts home rule. Amends the Massage Licensing Act to exempt from that Act persons licensed under the Asian Bodywork Therapy Licensing Act.

Last Action

Date	Chamber	Action
3/18/2011	Senate	Rule 3-9(a) / Re-referred to Assignments

SB 1665

Short Description: INC TX-MANDATES-REDUCTION

Senate Sponsors

Sen. Dale A. Righter

Synopsis As Introduced

Amends the State Finance Act. Repeals a Section of the Act that allows the Governor to reduce certain funds appropriated for statutory mandates for the purpose of accommodating budgetary limitations. Effective immediately.

Last Action

Date	Chamber	Action
3/18/2011	Senate	Rule 3-9(a) / Re-referred to Assignments

SB 1728

Short Description: COMPTROLLER-DIRECT DEPOSIT

Senate Sponsors

Sen. Tim Bivins and Wm. Sam McCann-Dan Duffy-Pamela J. Althoff

House Sponsors

(Rep. Jerry L. Mitchell)

Synopsis As Introduced

Amends the State Prompt Payment Act. Provides that interest payments under the Act must be made by electronic funds transfer. Provides that the State official or agency may not share the vendor's account information with any other State agency. Effective July 1, 2011.

Senate Floor Amendment No. 2

Replaces everything after the enacting clause. Amends the State Comptroller Act. Provides that State payments for an employee's payroll or an employee's expense reimbursement must be made through direct deposit. Sets forth exceptions, including collective bargaining agreements and hardship. Provides that all State payments to a vendor that exceed a certain allowable limit of paper warrants in a fiscal year, by the same agency, must be made through direct deposit. Provides that, if a State agency fails to meet the direct deposit requirements, the Comptroller may charge the employee or vendor a processing fee of \$2.50 per paper warrant. Amends the State Prompt Payment Act. Provides that an individual interest penalty for a late payment owed by the State amounting to \$5 or less shall not be paid by the State, except for claims for prescriptive services and any other service submitted by a federally qualified health center under Article V of the Illinois Public Aid Code, the Covering ALL KIDS Health Insurance Act, or the Children's Health Insurance Program Act to the Department of Healthcare and Family Services. Effective immediately.

Last Action

Date	Chamber	Action
5/31/2011	House	Rule 19(a) / Re-referred to Rules Committee

SB 1749

Short Description: SURGICAL ASSIST-TECHNOLOGIST

Senate Sponsors

Sen. M. Maggie Crotty and Mike Jacobs

Synopsis As Introduced

Creates the Surgical Technologists Act. Provides that a person may not practice surgical technology in a health care facility unless the person (i) has successfully completed a nationally accredited educational program for surgical technologists and holds and maintains the Certified Surgical Technologist credential, (ii) completed an appropriate training program for surgical technology in the Army, Navy, Air Force, Marine Corps, or Coast Guard of the United States or in the United States Public Health Service Commissioned Corps, (iii) provides evidence that the person was employed to practice surgical technology in a health care facility on the effective date of the Act, or (iv) is in the service of the federal government. Provides that a health care facility may employ a surgical technologist who does not meet the requirements of this Section under specified circumstances. Provides for continuing education requirements. Contains provisions concerning supervision. Effective January 1, 2012.

Senate Committee Amendment No. 1

Replaces everything after the enacting clause. Amends the Registered Surgical Assistant and Registered Surgical Technologist Title Protection Act. Makes changes in the provision concerning definitions and the application of Act. Provides that an applicant for registration as a surgical technologist satisfies one or more of the following requirements (i) has completed a nationally accredited surgical technologist program, (ii) is currently certified by the National Board of Surgical Technology and Surgical Assisting or its successor agency, (iii) was employed to practice as a surgical technologist by a hospital, ambulatory surgical treatment center, a physician medical group, or other entity, or (iv) has successfully completed a surgical technologist program in the Army, Navy, Air

Force, Marine Corps, or Coast Guard of the United States or in the United States Public Health Service Commissioned Corps. Effective immediately.

Last Action

Date	Chamber	Action
3/17/2011	Senate	Placed on Calendar Order of 3rd Reading March 29, 2011

SB 1750

Short Description: PERSONNEL-RN REGISTRY PILOT

Senate Sponsors

Sen. M. Maggie Crotty and Emil Jones, III-Michael Noland

House Sponsors

(Rep. Brandon W. Phelps, Jack D. Franks and Lisa M. Dugan)

Synopsis As Introduced

Amends the Personnel Code. Creates the Registered Nurse Registry Pilot Program to be administered by the Department of Central Management Services. Provides that the Department shall create and maintain an in-house registry of extra help employees for certain State operated facilities to improve staffing needs and to avoid the use of mandatory overtime. Provides that the in-house registry shall meet certain requirements. Provides that a State operated facility may appoint a Registered Nurse I or Correctional Nurse I as an extra help employee if certain conditions are met. Effective January 1, 2012.

Senate Committee Amendment No. 1

Provides that the in-house registry shall be developed in collaboration and by negotiation with a historical representative of RN stakeholders currently employed by the State at State operated facilities. Defines "historical representative" as a labor organization that has historically represented nurses classified as Registered Nurse I or Correctional Nurse I and that has been found by the Illinois Labor Relations Board to be the exclusive representative of nurses classified as Registered Nurse I or Correctional Nurse I who participate in the program.

Last Action

Date	Chamber	Action
5/31/2011	House	Rule 19(a) / Re-referred to Rules Committee

SB 1761

Short Description: NEWBORN-SCREENING TESTS

Senate Sponsors

Sen. Dale A. Righter-Heather A. Steans-A. J. Wilhelmi-Linda Holmes-William Delgado, Kirk W. Dillard, M. Maggie Crotty, Iris Y. Martinez, Donne E. Trotter and Mattie Hunter

House Sponsors

(Rep. JoAnn D. Osmond-Derrick Smith-Patricia R. Bellock, Jack McGuire, Mark H. Beaubien, Jr., Renée Kosel, Michael G. Connelly, Jason Barickman, Franco Coladipietro, Michael Unes, Keith P. Sommer, Anthony DeLuca, Jil Tracy and Esther Golar)

Synopsis As Introduced

Amends the Newborn Metabolic Screening Act. Provides that the Department of Public Health shall provide newborns with expanded screening tests for the presence of Mucopolysaccharidosis I (Hurler disease), Mucopolysaccharidosis II (Hunters disease), and Severe Combined Immunodeficiency Syndrome (SCIDS). Provides that if the Department is unable to provide expanded screening for SCIDS using the State Laboratory within 180 days after the effective date of the amendatory Act, then the Department shall temporarily provide the screening through an accredited laboratory selected by the Department until the Department has the capacity to provide screening through the State Laboratory. Permits the Department to substitute the fee charged by the accredited laboratory, plus a 5% surcharge for documentation and handling for the fee authorized if expanded screening is provided on a temporary basis through an accredited laboratory. Effective immediately.

Senate Floor Amendment No. 1

Provides that the Department of Public Health shall provide newborns with expanded screening tests beginning 90 days (instead of 30 days) after the effective date of the amendatory Act.

House Floor Amendment No. 1

Replaces everything after the enacting clause. Amends the Newborn Metabolic Screening Act. Provides that the Department of Public Health shall provide all newborns with expanded screening tests for the presence of (1) certain Lysosomal Storage Disorders known as Krabbe, Pompe, Gaucher, Fabry, and Niemann-Pick, (2) Severe Combined Immunodeficiency Disease (SCID), and (3) Mucopolysaccharidosis I (Hurlers) and Mucopolysaccharidosis II (Hunters). Provides that testing for each respective disorder or disease shall begin within 6 months or 12 months, depending on the disorder or disease, following the occurrence of certain events. Provides that the Department is authorized to implement an additional fee for the screening prior to beginning the testing in order to accumulate the resources for start-up and other costs associated with implementation of the screening and thereafter to support the costs associated with screening and follow-up programs for the disorder or disease. Makes other changes. Effective immediately.

Last Action

Date	Chamber	Action
5/26/2011	Senate	Passed Both Houses

SB 1762

Short Description: HEALTH CARE WORKER-SEX CRIME

Senate Sponsors

Sen. Kirk W. Dillard-Pamela J. Althoff, Kyle McCarter-Iris Y. Martinez-Jacqueline Y. Collins, Toi W. Hutchinson, William R. Haine, Mattie Hunter and Steven M Landek

House Sponsors

(Rep. Barbara Flynn Currie-Fred Crespo-Keith Farnham)

Synopsis As Introduced

Amends the Department of Professional Regulation Law of the Civil Administrative Code of Illinois. Provides that any licensed health care worker, who has been (1) convicted of committing a sexual criminal act that requires registration under the Sex Offender Registration Act against a patient in the course of patient care or treatment, (2) has been convicted of a criminal battery against any patient, (3) a forcible felony, or (4) required as part of a criminal sentence to register under the Sex Offender Registration Act, then the license of the health care worker shall by operation of law be permanently revoked without a hearing. Provides that no person registered as a sex offender may receive a license as a health care worker in Illinois. Requires that within 15 business days after receiving notice from the State's Attorney of the filing of criminal charges against the health care worker, the Secretary shall issue an administrative order that the health care worker may only practice with a chaperone during all patient encounters pending the outcome of the criminal proceedings. Adds provisions concerning the confidentiality of certain information and documents. Effective immediately.

Senate Floor Amendment No. 3

Replaces everything after the enacting clause. Reinserts the introduced bill with changes. Provides that no person who has been convicted of any specified offense or is required to register as a sex offender may receive a license as a health care worker in Illinois. Provides that a chaperone must be a licensed health care worker and the chaperone shall provide written notice to all the health care worker's patients explaining the Department's order to use a chaperone. Provides that each patient shall sign an acknowledgement that they received the notice. Provides that the notice to the patient of criminal charges shall include a statement that the health care worker is presumed innocent until proven guilty. Provides that the Department may adopt rules necessary to implement the provisions. Makes other changes. Effective 30 days after becoming law.

House Committee Amendment No. 1

Replaces everything after the enacting clause. Amends the Civil Administrative Code of Illinois. Makes a technical change in a Section concerning the Department of Financial and Professional Regulation.

Last Action

Date	Chamber	Action
5/31/2011	House	Rule 19(a) / Re-referred to Rules Committee

SB 1805

Short Description: DPH - INFECTIONS REPORT

Senate Sponsors

Sen. Pamela J. Althoff

House Sponsors

(Rep. Sidney H. Mathias-Patricia R. Bellock-Mary E. Flowers)

Synopsis As Introduced

Amends the Department of Public Health Powers and Duties Law of the Civil Administrative Code of Illinois. In the provision concerning Multidrug-Resistant Organisms (MDROs), requires the Department to publish a yearly report regarding certain MDRO infections based on a surveillance system substantially similar to the Center for Disease Control and Prevention's National Healthcare Safety Network surveillance system (instead of the Hospital Discharge Dataset).

Senate Committee Amendment No. 1

Requires the Department of Public Health to publish a yearly report regarding certain MDRO infections based on the Center for Disease Control and Prevention's National Healthcare Safety Network surveillance system or its successor (instead of a surveillance system substantially similar to the Center for Disease Control and Prevention's National Healthcare Safety Network surveillance system).

Last Action

Date	Chamber	Action
6/3/2011	Senate	Sent to the Governor

SB 1829

Short Description: MUNI CD-TAX-TOBACCO PRODUCTS

Senate Sponsors

Sen. Dan Kotowski

Synopsis As Introduced

Amends the Illinois Municipal Code. Provides that home rule municipalities may impose a tax on tobacco products, however measured.

Last Action

Date	Chamber	Action
4/8/2011	Senate	Rule 3-9(a) / Re-referred to Assignments

SB 1843

Short Description: MEDICAL-CHIROPRACTIC PHYSICIAN

Senate Sponsors

Sen. Iris Y. Martinez and Mattie Hunter

House Sponsors

(Rep. Brandon W. Phelps-Daniel V. Beiser-Thomas Holbrook-Monique D. Davis, Michelle Mussman, Jehan A. Gordon, Randy Ramey, Jr., Angelo Saviano and David Harris)

Synopsis As Introduced

Amends the Medical Practice Act. Provides that any person holding a valid license under the Act, including persons licensed as a chiropractic physician, may prescribe, dispense, or administer oxygen. Makes changes in provisions concerning licenses for general practice. Makes corresponding changes.

Senate Committee Amendment No. 1

Replaces everything after the enacting clause. Amends the Medical Practice Act of 1987. Creates a definition for "chiropractic physician". Makes corresponding changes. Effective immediately.

Last Action

Date	Chamber	Action
5/26/2011	Senate	Passed Both Houses

SB 1881

Short Description: HOSPITAL FAIR CARE ACT

Senate Sponsors

Sen. Iris Y. Martinez-Mattie Hunter and Heather A. Steans-Ira I. Silverstein

Synopsis As Introduced

Creates the Hospital Fair Care Act. Provides that each general hospital operating in the State must provide certain financial assistance to eligible individuals on a yearly basis in a total amount at least equal to the thresholds set in the Act. Sets forth provisions concerning financial assistance and eligibility. Provides that non-profit general hospitals must provide financial assistance for hospital fiscal year 2012 and beyond at a threshold level equal to at least 3.5% of the hospitals total revenue. Sets forth provisions concerning application for financial assistance, notification of the availability of financial assistance, and patient rights and responsibilities. Provides that each hospital that does not meet the applicable threshold level of financial assistance shall pay a fee that is deposited into the State Fair Care Trust Fund. Provides that the Department of Revenue shall be responsible for calculating each general non-profit hospital's Fair Care fee. Sets forth provisions concerning the position of Fair Care Officer to be established within the Department of Revenue. Amends the State Finance Act

to create the Fair Care Trust Fund. Makes other changes. Effective on January 1, 2012.

Senate Committee Amendment No. 1

Makes a change in the provision concerning legislative findings. Includes legal guardians in the definition of "family" as the term applies to an individual under 18 years of age. Changes references of the Department of Revenue to the Department of Healthcare and Family Services. Provides that the position of Fair Care Officer is created within the Department of Healthcare and Family Services. Changes a reference of the State's Attorney to the Attorney General. Provides that if a general non-profit hospital refuses to pay the Fair Care fee, then the Department of Healthcare and Family Services may request that the Department of Revenue revoke that hospital's property tax exemption for that year (instead of the State Department of Revenue may revoke that hospital's property tax exemption for that year).

Last Action

Date	Chamber	Action
3/18/2011	Senate	Rule 3-9(a) / Re-referred to Assignments

SB 1887

Short Description: REENACT 94-677 INSUR INTEREST

Senate Sponsors

Sen. Kirk W. Dillard

Synopsis As Introduced

Amends the Illinois Insurance Code, the Medical Practice Act of 1987, the Code of Civil Procedure, and the Good Samaritan Act to reenact certain provisions of Public Act 94-677, which was declared to be unconstitutional. Includes explanatory and validation provisions. Makes changes relating to the reenactment, including revisory changes. Also makes these substantive changes: Amends the Code of Civil Procedure to lower the rate of interest payable on judgments; to provide for annual indexing of those rates; and to delay the accrual of interest in certain cases where a federal Medicare lien may exist against the judgment. Includes an inseverability provision. Effective immediately.

Last Action

Date	Chamber	Action
3/18/2011	Senate	Rule 3-9(a) / Re-referred to Assignments

SB 1888

Short Description: CIVIL ACTIONS-PA 89-7 & 94-677

Senate Sponsors

Sen. Kirk W. Dillard

Synopsis As Introduced

Re-enacts and repeals various statutory provisions to eliminate changes that were made by Public Act 89-7, which was held to be void in its entirety by the Illinois Supreme Court in. Repeals a provision of the Code of Civil Procedure concerning standards for economic and non-economic damages that was added by Public Act 94-677 and was specifically declared unconstitutional by the Illinois Supreme Court in and the Sorry Works! Pilot Program Act, which was declared unconstitutional because of the inseverability clause contained in Public Act 94-677. Effective immediately.

Last Action

Date	Chamber	Action
3/18/2011	Senate	Rule 3-9(a) / Re-referred to Assignments

SB 1893

Short Description: HEALTH COURT-TECH

Senate Sponsors

Sen. David S. Luechtefeld

Synopsis As Introduced

Creates the Health Court Act. Contains only a short title provision.

Last Action

Date	Chamber	Action
2/10/2011	Senate	Referred to Assignments

SB 1896

Short Description: DHS-SUBSTANCE USE DISORDERS

Senate Sponsors

Sen. Mattie Hunter

Synopsis As Introduced

Amends the Alcoholism and Other Drug Abuse and Dependency Act. Makes changes to various provisions concerning the Department of Human Services' functions under the Act; reporting deadlines; licensure requirements; the development of a statewide prevention system; comprehensive treatment services; discrimination in health coverage and the provision of health care services; and other matters. Defines terms. Renames the Compulsive Gambling Program the Disordered Gambling Program. Effective immediately.

Last Action

Date	Chamber	Action
3/18/2011	Senate	Rule 3-9(a) / Re-referred to Assignments

SB 1915

Short Description: SINGLE-PAYER HEALTH CARE ACT

Senate Sponsors

Sen. Michael Noland

Synopsis As Introduced

Creates the Single-payer Health and Universal Care System Act. Sets forth the findings of the General Assembly. Provides that in conjunction with the Department of Insurance, the Department of Healthcare and Family Services shall examine the feasibility of creating and implementing a health care access plan that accomplishes certain goals. Provides that the Department of Healthcare and Family Services shall issue a report of its findings and recommendations to the General Assembly on or before July 1, 2012. Effective immediately.

Last Action

Date	Chamber	Action
3/18/2011	Senate	Rule 3-9(a) / Re-referred to Assignments

SB 1916

Short Description: MIN WAGE-CER NURSING ASSISTANT

Senate Sponsors

Sen. Donne E. Trotter and Emil Jones, III

Synopsis As Introduced

Amends the Minimum Wage Law. Provides that no certified nursing assistant shall be required to work mandated overtime except in cases of an unforeseen emergent circumstance when such overtime is required only as a last resort, and only 4 additional hours in such cases. Provides that when a certified nursing assistant is mandated to work up to 12 consecutive hours, the certified nursing assistant must be allowed at least 8 consecutive hours of off-duty time immediately following the completion of such a shift. Provides that no employer shall discipline, discharge, or take any other adverse action against a certified nursing assistant solely because the certified nursing assistant refused to work mandated overtime as prohibited.

Last Action

Date	Chamber	Action
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3/18/2011	Senate	Rule 3-9(a) / Re-referred to Assignments
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SB 1919

Short Description: DENTAL PRACT ACT-HYGIENIST

Senate Sponsors

Sen. Donne E. Trotter

Synopsis As Introduced

Amends the Illinois Dental Practice Act. Provides that a dental hygienist may be employed or engaged by a licensed physician. Provides that a dental hygienist may be employed or retained by a health care facility, program, or nonprofit organization to perform dental hygiene services without the patient first being examined by a licensed dentist if the dental hygienist (i) has engaged in active practice of clinical dental hygiene for a minimum of 2,400 hours in the past 18 months or a career total of 3,000 hours, (ii) has entered into a collaborative agreement with a licensed dentist, (iii) had documented participation in course in infection control and medical emergencies, and (iv) maintains current CPR certification. Authorizes the dental hygienist to perform limited specified services. Provides that a licensed dentist may not have a collaborative agreement with more than 4 dental hygienists unless otherwise authorized by the Board. Provides that the collaborative agreement must (i) include certain provisions and it must be signed and maintained by the dentist, the dental hygienist, and the facility, program, or organization, (ii) be reviewed yearly, and (iii) be made available to the Board upon request. Effective immediately.

Last Action

Date	Chamber	Action
3/18/2011	Senate	Rule 3-9(a) / Re-referred to Assignments

SB 1942

Short Description: INS CD-DIABETES SELF MGT ED

Senate Sponsors

Sen. William Delgado

Synopsis As Introduced

Amends the Illinois Insurance Code to include in the requirement for diabetes self-management training and education coverage, coverage for the treatment of pain associated with complications of diabetes, including, but not limited to, diabetic peripheral neuropathy.

Last Action

Date	Chamber	Action
3/18/2011	Senate	Rule 3-9(a) / Re-referred to Assignments

SB 1943

Short Description: MED PATIENT RT-DISCRIMINATION

Senate Sponsors

Sen. William Delgado-Michael W. Frerichs-Mattie Hunter-Jacqueline Y. Collins

House Sponsors

(Rep. Naomi D. Jakobsson-Mary E. Flowers and Kimberly du Buclet)

Synopsis As Introduced

Amends the Medical Patient Rights Act. Provides that a hospital must include in its written statement of patients' rights the right not to be discriminated against by the hospital due to the patient's race, color, or national origin where such characteristics are not relevant to the patient's medical diagnosis and treatment, and that the statement should put the patient on notice on how to initiate a grievance with the hospital or with the Illinois Department of Public Health regarding improper discrimination. Sets forth discrimination grievance procedures and provides language all hospitals must post for the benefit of patients

regarding the hospital's emergency room anti-discrimination policy. Effective immediately.

House Committee Amendment No. 2

Replaces everything after the enacting clause. Amends the Lead Poisoning Prevention Act. In the provision concerning warning statements, makes changes to the definitions. Makes changes concerning the required contents of the warning statements. Provides that the warning statement is not required if the component parts of the item containing lead are inaccessible to a child through normal and reasonably foreseeable use and abuse or if the component parts in question are exempt from third-party testing.

House Floor Amendment No. 3

Replaces everything after the enacting clause with the bill as amended by House Committee Amendment No. 2 and the following changes. Makes changes to the definition of "child care article" and "toy containing paint". Adds the phrase "complies with federal standards" to the required contents of the warning statements. Restores current law with regard to the warning statement concerning certain lead bearing substances.

House Floor Amendment No. 4

Makes a change to the required contents of the warning statements.

Last Action

Date	Chamber	Action
5/31/2011	Senate	Passed Both Houses

SB 1944

Short Description: PRENATAL TOXOPLASMOSIS ACT

Senate Sponsors

Sen. William Delgado

Synopsis As Introduced

Creates the Prenatal and Neonatal Congenital Toxoplasmosis Prevention and Treatment Act. Sets forth definitions. Provides that health care professionals shall provide counseling for Toxoplasmosis and testing for *T. gondii* when providing care to a pregnant woman during her pregnancy, unless the woman has been diagnosed prior to the pregnancy or she refuses, and during her delivery, unless she has already been determined to be IgG positive and chronically infected or she refuses. Sets forth circumstances under which every health care professional or facility caring for a newborn infant shall provide counseling and perform Toxoplasmosis testing. Sets forth subject matter requirements for the counseling required under the Act. Provides that consent for testing of a newborn infant shall be presumed when a health care professional or facility seeks to perform a test on a newborn infant whose mother's Toxoplasmosis status is unknown, provided that mandated counseling has taken place. Provides that the Department of Public Health shall adopt necessary rules to implement the Act. Effective immediately.

Senate Committee Amendment No. 1

Replaces everything after the enacting clause. Creates the Prenatal and Neonatal Congenital Toxoplasmosis Prevention and Treatment Act. Contains only a short title provision.

Last Action

Date	Chamber	Action
3/15/2011	Senate	Placed on Calendar Order of 2nd Reading March 16, 2011

SB 1945

Short Description: COMPREHENSIVE HLTHCARE ACT

Senate Sponsors

Sen. William Delgado-Donne E. Trotter-David Koehler-Michael Noland-Iris Y. Martinez, Mattie Hunter and Jacqueline Y. Collins

House Sponsors

(Rep. Elizabeth Hernandez-Robyn Gabel-Kimberly du Buclet)

Synopsis As Introduced

Creates the Comprehensive Healthcare Workforce Planning Act. Establishes the State Healthcare Workforce Council to provide an ongoing assessment of health care workforce trends, training issues, and financing policies and to recommend appropriate State government and private sector efforts to address identified needs. Provides that the Council's work shall focus on health care workforce supply and distribution; cultural competence and minority participation in health professions education; primary care training and practice; and data evaluation and analysis. Contains provisions concerning members; the preparation of a comprehensive healthcare workforce plan by the Department of Public Health and the Council; and reimbursement of Council members.

Senate Committee Amendment No. 1

Adds an effective date of July 1, 2012.

Senate Floor Amendment No. 2

Provides that implementation of the Act is entirely subject to the availability and appropriation of funds from federal grant money applied for by the Department of Public Health. Provides that State Healthcare Workforce Council shall work in coordination with the State Health Improvement Plan Implementation Coordination Council to ensure alignment with the State Health Improvement Plan. Includes representatives of pharmacists among the health care workforce experts who are appointed by the Governor to the State Healthcare Workforce Council.

Last Action

Date	Chamber	Action
5/19/2011	Senate	Passed Both Houses

SB 2155

Short Description: WRK COMP-LEVEL OF DISABILITY

Senate Sponsors

Sen. Bill Brady

Synopsis As Introduced

Amends the Workers' Compensation Act. Provides that the maximum weekly benefit if, after the accidental injury, an employee becomes partially incapacitated from pursuing his or her usual and customary line of employment, shall be 66 2/3% of the State's average weekly wage in covered industries under the Unemployment Insurance Act; such awards being known as wage differential awards shall cease when the employee reaches age 67 or 15 years after the accident. Provides that permanent partial or total disability shall be certified by a physician and demonstrated by use of medically defined objective measurements, that subjective complaints shall not be considered unless supported by and clearly related to objective measurements, and that a specified publication shall be applied in determining the level of disability. Provides that temporary total disability payments shall not exceed 104 weeks if the injured employee's medical impairment rating determined as a percentage of the whole person is less than 70%. Provides that the Illinois Workers' Compensation Commission may recall a decision or settlement when fraud has been determined to be committed related to the case. Provides that the fraud and insurance non-compliance unit of the Division of Insurance of the Department of Financial and Professional Regulation shall employ one or more attorneys as special prosecutors who shall initiate and prosecute any necessary criminal or civil actions. Makes numerous changes regarding employee intoxication, the Attorney General and State's Attorney, posting information on the web regarding unlawful acts, and other changes.

Last Action

Date	Chamber	Action
4/11/2011	Senate	Placed on Calendar Order of 3rd Reading April 12, 2011

SB 2165

Short Description: INS CD-FACILITY BASED PROVIDER

Senate Sponsors

Sen. Dave Syverson

Synopsis As Introduced

If House Bill 5085 of the 96th General Assembly becomes law, amends the State Employees Group Insurance Act of 1971, the Counties Code, the Illinois

Municipal Code, the School Code, the Illinois Insurance Code, the Health Maintenance Organization Act, and the Voluntary Health Services Plans Act to provide that a nonparticipating facility-based physician or provider may bill the beneficiary, insured, or enrollee for services determined by the insurer or health plan to be a noncovered service if the basis for denial is other than lack of medical necessity. Provides that a nonparticipating facility-based physician's or provider's acceptance of payment from an insurer or health plan regarding a claim in dispute prior to the initiation of arbitration shall not bar the initiation of arbitration by the nonparticipating facility-based physician or provider. Provides that nothing in the provision concerning nonparticipating facility-based physicians and providers shall be interpreted to change the prudent layperson provisions with respect to emergency services under the Managed Care Reform and Patient Rights Act. Sets forth provisions concerning arbitration. Effective upon becoming law or on the effective date of House Bill 5085 of the 96th General Assembly, whichever is later.

Last Action

Date	Chamber	Action
3/18/2011	Senate	Rule 3-9(a) / Re-referred to Assignments

SB 2255

Short Description: NURSE ACT-PRESCRIBE SCHED II

Senate Sponsors

Sen. William R. Haine, Gary Forby and Donne E. Trotter

House Sponsors

(Rep. Sara Feigenholtz-Dan Reitz-Patrick J. Verschoore-Brandon W. Phelps-Richard Morthland, Lisa M. Dugan and Fred Crespo)

Synopsis As Introduced

Amends the Nurse Practice Act. Provides that a collaborating physician or podiatrist may, but is not required to, delegate prescriptive authority to an advanced practice nurse as part of a written collaborative agreement of Schedule II (instead of III) through V controlled substances. Effective immediately.

Senate Committee Amendment No. 2

Replaces everything after the enacting clause. Amends the Nurse Practice Act. Provides that a collaborating physician or podiatrist may delegate authority to an advanced practice nurse to prescribe any Schedule II controlled substances if all conditions are met. Provides that an advanced practice nurse who writes a prescription for a controlled substance without the valid license may be fined by the Department not more than \$50 per prescription. Makes corresponding changes. Amends the Physician Assistant Practice Act of 1987. Provides that a supervising physician may delegate authority to a physician assistant to prescribe any Schedule II controlled substances if all conditions are met. Provides that a physician assistant who writes a prescription for a controlled substance without the valid license may be fined by the Department not more than \$50 per prescription. Makes corresponding changes. Makes corresponding changes in the Medical Practice Act of 1987, the Podiatrist Medical Practice Act of 1987, and the Illinois Controlled Substances Act. Makes other changes related to prescriptive authority. Effective July 1, 2011.

Senate Committee Amendment No. 3

Provides that the physician assistant must provide evidence of satisfactory completion of 45 contact hours in pharmacology from any physician assistant program accredited by the Accreditation Review Commission on Education for the Physician Assistant (ARC-PA), or its predecessor agency, for any new license issued with Schedule II authority.

Last Action

Date	Chamber	Action
5/31/2011	Senate	Passed Both Houses

HR 383

Short Description: URGE GOV/SOS-HELMET TASK FORCE

House Sponsors

Rep. Robyn Gabel-Derrick Smith-Deborah Mell

Synopsis As Introduced

Urges the Governor and the Illinois Secretary of State to convene a task force or working group to explore, discuss, and coordinate efforts to conduct a public awareness campaign to educate the general public about the value of cycling to children, along with the safety benefits of children wearing bicycle helmets.

Last Action

Date	Chamber	Action
5/31/2011	House	Resolution Adopted 112-002-001

SR 244

Short Description: URGE GOV/SOS-HELMET TASK FORCE

Senate Sponsors

Sen. Ira I. Silverstein

Synopsis As Introduced

Urges the Governor and the Illinois Secretary of State to convene a task force or working group to explore, discuss, and coordinate efforts to conduct a public awareness campaign to educate the general public about the value of cycling to children, along with the safety benefits of children wearing bicycle helmets.

Last Action

Date	Chamber	Action
5/25/2011	Senate	Resolution Adopted

Totals: 112 - (House Bills: 60) (Senate Bills: 50) (Other Bills: 2)