

1 AN ACT concerning regulation.

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

4 Section 5. The Illinois Health Facilities Planning Act is
5 amended by changing Sections 3 and 13 as follows:

6 (20 ILCS 3960/3) (from Ch. 111 1/2, par. 1153)

7 (Text of Section before amendment by P.A. 100-518)

8 (Section scheduled to be repealed on December 31, 2019)

9 Sec. 3. Definitions. As used in this Act:

10 "Health care facilities" means and includes the following
11 facilities, organizations, and related persons:

12 (1) An ambulatory surgical treatment center required
13 to be licensed pursuant to the Ambulatory Surgical
14 Treatment Center Act.

15 (2) An institution, place, building, or agency
16 required to be licensed pursuant to the Hospital Licensing
17 Act.

18 (3) Skilled and intermediate long term care facilities
19 licensed under the Nursing Home Care Act.

20 (A) If a demonstration project under the Nursing
21 Home Care Act applies for a certificate of need to
22 convert to a nursing facility, it shall meet the
23 licensure and certificate of need requirements in

1 effect as of the date of application.

2 (B) Except as provided in item (A) of this
3 subsection, this Act does not apply to facilities
4 granted waivers under Section 3-102.2 of the Nursing
5 Home Care Act.

6 (3.5) Skilled and intermediate care facilities
7 licensed under the ID/DD Community Care Act or the MC/DD
8 Act. No permit or exemption is required for a facility
9 licensed under the ID/DD Community Care Act or the MC/DD
10 Act prior to the reduction of the number of beds at a
11 facility. If there is a total reduction of beds at a
12 facility licensed under the ID/DD Community Care Act or the
13 MC/DD Act, this is a discontinuation or closure of the
14 facility. If a facility licensed under the ID/DD Community
15 Care Act or the MC/DD Act reduces the number of beds or
16 discontinues the facility, that facility must notify the
17 Board as provided in Section 14.1 of this Act.

18 (3.7) Facilities licensed under the Specialized Mental
19 Health Rehabilitation Act of 2013.

20 (4) Hospitals, nursing homes, ambulatory surgical
21 treatment centers, or kidney disease treatment centers
22 maintained by the State or any department or agency
23 thereof.

24 (5) Kidney disease treatment centers, including a
25 free-standing hemodialysis unit required to meet the
26 requirements of 42 CFR 494 in order to be certified for

1 participation in Medicare and Medicaid under Titles XVIII
2 and XIX of the federal Social Security Act ~~be licensed~~
3 ~~under the End Stage Renal Disease Facility Act.~~

4 (A) This Act does not apply to a dialysis facility
5 that provides only dialysis training, support, and
6 related services to individuals with end stage renal
7 disease who have elected to receive home dialysis.

8 (B) This Act does not apply to a dialysis unit
9 located in a licensed nursing home that offers or
10 provides dialysis-related services to residents with
11 end stage renal disease who have elected to receive
12 home dialysis within the nursing home.

13 (C) The Board, however, may require dialysis
14 facilities and licensed nursing homes under items (A)
15 and (B) of this subsection to report statistical
16 information on a quarterly basis to the Board to be
17 used by the Board to conduct analyses on the need for
18 proposed kidney disease treatment centers.

19 (6) An institution, place, building, or room used for
20 the performance of outpatient surgical procedures that is
21 leased, owned, or operated by or on behalf of an
22 out-of-state facility.

23 (7) An institution, place, building, or room used for
24 provision of a health care category of service, including,
25 but not limited to, cardiac catheterization and open heart
26 surgery.

1 (8) An institution, place, building, or room housing
2 major medical equipment used in the direct clinical
3 diagnosis or treatment of patients, and whose project cost
4 is in excess of the capital expenditure minimum.

5 "Health care facilities" does not include the following
6 entities or facility transactions:

7 (1) Federally-owned facilities.

8 (2) Facilities used solely for healing by prayer or
9 spiritual means.

10 (3) An existing facility located on any campus facility
11 as defined in Section 5-5.8b of the Illinois Public Aid
12 Code, provided that the campus facility encompasses 30 or
13 more contiguous acres and that the new or renovated
14 facility is intended for use by a licensed residential
15 facility.

16 (4) Facilities licensed under the Supportive
17 Residences Licensing Act or the Assisted Living and Shared
18 Housing Act.

19 (5) Facilities designated as supportive living
20 facilities that are in good standing with the program
21 established under Section 5-5.01a of the Illinois Public
22 Aid Code.

23 (6) Facilities established and operating under the
24 Alternative Health Care Delivery Act as a children's
25 community-based health care center alternative health care
26 model demonstration program or as an Alzheimer's Disease

1 Management Center alternative health care model
2 demonstration program.

3 (7) The closure of an entity or a portion of an entity
4 licensed under the Nursing Home Care Act, the Specialized
5 Mental Health Rehabilitation Act of 2013, the ID/DD
6 Community Care Act, or the MC/DD Act, with the exception of
7 facilities operated by a county or Illinois Veterans Homes,
8 that elect to convert, in whole or in part, to an assisted
9 living or shared housing establishment licensed under the
10 Assisted Living and Shared Housing Act and with the
11 exception of a facility licensed under the Specialized
12 Mental Health Rehabilitation Act of 2013 in connection with
13 a proposal to close a facility and re-establish the
14 facility in another location.

15 (8) Any change of ownership of a health care facility
16 that is licensed under the Nursing Home Care Act, the
17 Specialized Mental Health Rehabilitation Act of 2013, the
18 ID/DD Community Care Act, or the MC/DD Act, with the
19 exception of facilities operated by a county or Illinois
20 Veterans Homes. Changes of ownership of facilities
21 licensed under the Nursing Home Care Act must meet the
22 requirements set forth in Sections 3-101 through 3-119 of
23 the Nursing Home Care Act.

24 With the exception of those health care facilities
25 specifically included in this Section, nothing in this Act
26 shall be intended to include facilities operated as a part of

1 the practice of a physician or other licensed health care
2 professional, whether practicing in his individual capacity or
3 within the legal structure of any partnership, medical or
4 professional corporation, or unincorporated medical or
5 professional group. Further, this Act shall not apply to
6 physicians or other licensed health care professional's
7 practices where such practices are carried out in a portion of
8 a health care facility under contract with such health care
9 facility by a physician or by other licensed health care
10 professionals, whether practicing in his individual capacity
11 or within the legal structure of any partnership, medical or
12 professional corporation, or unincorporated medical or
13 professional groups, unless the entity constructs, modifies,
14 or establishes a health care facility as specifically defined
15 in this Section. This Act shall apply to construction or
16 modification and to establishment by such health care facility
17 of such contracted portion which is subject to facility
18 licensing requirements, irrespective of the party responsible
19 for such action or attendant financial obligation.

20 "Person" means any one or more natural persons, legal
21 entities, governmental bodies other than federal, or any
22 combination thereof.

23 "Consumer" means any person other than a person (a) whose
24 major occupation currently involves or whose official capacity
25 within the last 12 months has involved the providing,
26 administering or financing of any type of health care facility,

1 (b) who is engaged in health research or the teaching of
2 health, (c) who has a material financial interest in any
3 activity which involves the providing, administering or
4 financing of any type of health care facility, or (d) who is or
5 ever has been a member of the immediate family of the person
6 defined by (a), (b), or (c).

7 "State Board" or "Board" means the Health Facilities and
8 Services Review Board.

9 "Construction or modification" means the establishment,
10 erection, building, alteration, reconstruction, modernization,
11 improvement, extension, discontinuation, change of ownership,
12 of or by a health care facility, or the purchase or acquisition
13 by or through a health care facility of equipment or service
14 for diagnostic or therapeutic purposes or for facility
15 administration or operation, or any capital expenditure made by
16 or on behalf of a health care facility which exceeds the
17 capital expenditure minimum; however, any capital expenditure
18 made by or on behalf of a health care facility for (i) the
19 construction or modification of a facility licensed under the
20 Assisted Living and Shared Housing Act or (ii) a conversion
21 project undertaken in accordance with Section 30 of the Older
22 Adult Services Act shall be excluded from any obligations under
23 this Act.

24 "Establish" means the construction of a health care
25 facility or the replacement of an existing facility on another
26 site or the initiation of a category of service.

1 "Major medical equipment" means medical equipment which is
2 used for the provision of medical and other health services and
3 which costs in excess of the capital expenditure minimum,
4 except that such term does not include medical equipment
5 acquired by or on behalf of a clinical laboratory to provide
6 clinical laboratory services if the clinical laboratory is
7 independent of a physician's office and a hospital and it has
8 been determined under Title XVIII of the Social Security Act to
9 meet the requirements of paragraphs (10) and (11) of Section
10 1861(s) of such Act. In determining whether medical equipment
11 has a value in excess of the capital expenditure minimum, the
12 value of studies, surveys, designs, plans, working drawings,
13 specifications, and other activities essential to the
14 acquisition of such equipment shall be included.

15 "Capital Expenditure" means an expenditure: (A) made by or
16 on behalf of a health care facility (as such a facility is
17 defined in this Act); and (B) which under generally accepted
18 accounting principles is not properly chargeable as an expense
19 of operation and maintenance, or is made to obtain by lease or
20 comparable arrangement any facility or part thereof or any
21 equipment for a facility or part; and which exceeds the capital
22 expenditure minimum.

23 For the purpose of this paragraph, the cost of any studies,
24 surveys, designs, plans, working drawings, specifications, and
25 other activities essential to the acquisition, improvement,
26 expansion, or replacement of any plant or equipment with

1 respect to which an expenditure is made shall be included in
2 determining if such expenditure exceeds the capital
3 expenditures minimum. Unless otherwise interdependent, or
4 submitted as one project by the applicant, components of
5 construction or modification undertaken by means of a single
6 construction contract or financed through the issuance of a
7 single debt instrument shall not be grouped together as one
8 project. Donations of equipment or facilities to a health care
9 facility which if acquired directly by such facility would be
10 subject to review under this Act shall be considered capital
11 expenditures, and a transfer of equipment or facilities for
12 less than fair market value shall be considered a capital
13 expenditure for purposes of this Act if a transfer of the
14 equipment or facilities at fair market value would be subject
15 to review.

16 "Capital expenditure minimum" means \$11,500,000 for
17 projects by hospital applicants, \$6,500,000 for applicants for
18 projects related to skilled and intermediate care long-term
19 care facilities licensed under the Nursing Home Care Act, and
20 \$3,000,000 for projects by all other applicants, which shall be
21 annually adjusted to reflect the increase in construction costs
22 due to inflation, for major medical equipment and for all other
23 capital expenditures.

24 "Non-clinical service area" means an area (i) for the
25 benefit of the patients, visitors, staff, or employees of a
26 health care facility and (ii) not directly related to the

1 diagnosis, treatment, or rehabilitation of persons receiving
2 services from the health care facility. "Non-clinical service
3 areas" include, but are not limited to, chapels; gift shops;
4 news stands; computer systems; tunnels, walkways, and
5 elevators; telephone systems; projects to comply with life
6 safety codes; educational facilities; student housing;
7 patient, employee, staff, and visitor dining areas;
8 administration and volunteer offices; modernization of
9 structural components (such as roof replacement and masonry
10 work); boiler repair or replacement; vehicle maintenance and
11 storage facilities; parking facilities; mechanical systems for
12 heating, ventilation, and air conditioning; loading docks; and
13 repair or replacement of carpeting, tile, wall coverings,
14 window coverings or treatments, or furniture. Solely for the
15 purpose of this definition, "non-clinical service area" does
16 not include health and fitness centers.

17 "Areawide" means a major area of the State delineated on a
18 geographic, demographic, and functional basis for health
19 planning and for health service and having within it one or
20 more local areas for health planning and health service. The
21 term "region", as contrasted with the term "subregion", and the
22 word "area" may be used synonymously with the term "areawide".

23 "Local" means a subarea of a delineated major area that on
24 a geographic, demographic, and functional basis may be
25 considered to be part of such major area. The term "subregion"
26 may be used synonymously with the term "local".

1 "Physician" means a person licensed to practice in
2 accordance with the Medical Practice Act of 1987, as amended.

3 "Licensed health care professional" means a person
4 licensed to practice a health profession under pertinent
5 licensing statutes of the State of Illinois.

6 "Director" means the Director of the Illinois Department of
7 Public Health.

8 "Agency" or "Department" means the Illinois Department of
9 Public Health.

10 "Alternative health care model" means a facility or program
11 authorized under the Alternative Health Care Delivery Act.

12 "Out-of-state facility" means a person that is both (i)
13 licensed as a hospital or as an ambulatory surgery center under
14 the laws of another state or that qualifies as a hospital or an
15 ambulatory surgery center under regulations adopted pursuant
16 to the Social Security Act and (ii) not licensed under the
17 Ambulatory Surgical Treatment Center Act, the Hospital
18 Licensing Act, or the Nursing Home Care Act. Affiliates of
19 out-of-state facilities shall be considered out-of-state
20 facilities. Affiliates of Illinois licensed health care
21 facilities 100% owned by an Illinois licensed health care
22 facility, its parent, or Illinois physicians licensed to
23 practice medicine in all its branches shall not be considered
24 out-of-state facilities. Nothing in this definition shall be
25 construed to include an office or any part of an office of a
26 physician licensed to practice medicine in all its branches in

1 Illinois that is not required to be licensed under the
2 Ambulatory Surgical Treatment Center Act.

3 "Change of ownership of a health care facility" means a
4 change in the person who has ownership or control of a health
5 care facility's physical plant and capital assets. A change in
6 ownership is indicated by the following transactions: sale,
7 transfer, acquisition, lease, change of sponsorship, or other
8 means of transferring control.

9 "Related person" means any person that: (i) is at least 50%
10 owned, directly or indirectly, by either the health care
11 facility or a person owning, directly or indirectly, at least
12 50% of the health care facility; or (ii) owns, directly or
13 indirectly, at least 50% of the health care facility.

14 "Charity care" means care provided by a health care
15 facility for which the provider does not expect to receive
16 payment from the patient or a third-party payer.

17 "Freestanding emergency center" means a facility subject
18 to licensure under Section 32.5 of the Emergency Medical
19 Services (EMS) Systems Act.

20 "Category of service" means a grouping by generic class of
21 various types or levels of support functions, equipment, care,
22 or treatment provided to patients or residents, including, but
23 not limited to, classes such as medical-surgical, pediatrics,
24 or cardiac catheterization. A category of service may include
25 subcategories or levels of care that identify a particular
26 degree or type of care within the category of service. Nothing

1 in this definition shall be construed to include the practice
2 of a physician or other licensed health care professional while
3 functioning in an office providing for the care, diagnosis, or
4 treatment of patients. A category of service that is subject to
5 the Board's jurisdiction must be designated in rules adopted by
6 the Board.

7 "State Board Staff Report" means the document that sets
8 forth the review and findings of the State Board staff, as
9 prescribed by the State Board, regarding applications subject
10 to Board jurisdiction.

11 (Source: P.A. 98-414, eff. 1-1-14; 98-629, eff. 1-1-15; 98-651,
12 eff. 6-16-14; 98-1086, eff. 8-26-14; 99-78, eff. 7-20-15;
13 99-180, eff. 7-29-15; 99-527, eff. 1-1-17.)

14 (Text of Section after amendment by P.A. 100-518)

15 (Section scheduled to be repealed on December 31, 2019)

16 Sec. 3. Definitions. As used in this Act:

17 "Health care facilities" means and includes the following
18 facilities, organizations, and related persons:

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20 to be licensed pursuant to the Ambulatory Surgical
21 Treatment Center Act.

22 (2) An institution, place, building, or agency
23 required to be licensed pursuant to the Hospital Licensing
24 Act.

25 (3) Skilled and intermediate long term care facilities

1 licensed under the Nursing Home Care Act.

2 (A) If a demonstration project under the Nursing
3 Home Care Act applies for a certificate of need to
4 convert to a nursing facility, it shall meet the
5 licensure and certificate of need requirements in
6 effect as of the date of application.

7 (B) Except as provided in item (A) of this
8 subsection, this Act does not apply to facilities
9 granted waivers under Section 3-102.2 of the Nursing
10 Home Care Act.

11 (3.5) Skilled and intermediate care facilities
12 licensed under the ID/DD Community Care Act or the MC/DD
13 Act. No permit or exemption is required for a facility
14 licensed under the ID/DD Community Care Act or the MC/DD
15 Act prior to the reduction of the number of beds at a
16 facility. If there is a total reduction of beds at a
17 facility licensed under the ID/DD Community Care Act or the
18 MC/DD Act, this is a discontinuation or closure of the
19 facility. If a facility licensed under the ID/DD Community
20 Care Act or the MC/DD Act reduces the number of beds or
21 discontinues the facility, that facility must notify the
22 Board as provided in Section 14.1 of this Act.

23 (3.7) Facilities licensed under the Specialized Mental
24 Health Rehabilitation Act of 2013.

25 (4) Hospitals, nursing homes, ambulatory surgical
26 treatment centers, or kidney disease treatment centers

1 maintained by the State or any department or agency
2 thereof.

3 (5) Kidney disease treatment centers, including a
4 free-standing hemodialysis unit required to meet the
5 requirements of 42 CFR 494 in order to be certified for
6 participation in Medicare and Medicaid under Titles XVIII
7 and XIX of the federal Social Security Act ~~be licensed~~
8 ~~under the End Stage Renal Disease Facility Act.~~

9 (A) This Act does not apply to a dialysis facility
10 that provides only dialysis training, support, and
11 related services to individuals with end stage renal
12 disease who have elected to receive home dialysis.

13 (B) This Act does not apply to a dialysis unit
14 located in a licensed nursing home that offers or
15 provides dialysis-related services to residents with
16 end stage renal disease who have elected to receive
17 home dialysis within the nursing home.

18 (C) The Board, however, may require dialysis
19 facilities and licensed nursing homes under items (A)
20 and (B) of this subsection to report statistical
21 information on a quarterly basis to the Board to be
22 used by the Board to conduct analyses on the need for
23 proposed kidney disease treatment centers.

24 (6) An institution, place, building, or room used for
25 the performance of outpatient surgical procedures that is
26 leased, owned, or operated by or on behalf of an

1 out-of-state facility.

2 (7) An institution, place, building, or room used for
3 provision of a health care category of service, including,
4 but not limited to, cardiac catheterization and open heart
5 surgery.

6 (8) An institution, place, building, or room housing
7 major medical equipment used in the direct clinical
8 diagnosis or treatment of patients, and whose project cost
9 is in excess of the capital expenditure minimum.

10 "Health care facilities" does not include the following
11 entities or facility transactions:

12 (1) Federally-owned facilities.

13 (2) Facilities used solely for healing by prayer or
14 spiritual means.

15 (3) An existing facility located on any campus facility
16 as defined in Section 5-5.8b of the Illinois Public Aid
17 Code, provided that the campus facility encompasses 30 or
18 more contiguous acres and that the new or renovated
19 facility is intended for use by a licensed residential
20 facility.

21 (4) Facilities licensed under the Supportive
22 Residences Licensing Act or the Assisted Living and Shared
23 Housing Act.

24 (5) Facilities designated as supportive living
25 facilities that are in good standing with the program
26 established under Section 5-5.01a of the Illinois Public

1 Aid Code.

2 (6) Facilities established and operating under the
3 Alternative Health Care Delivery Act as a children's
4 community-based health care center alternative health care
5 model demonstration program or as an Alzheimer's Disease
6 Management Center alternative health care model
7 demonstration program.

8 (7) The closure of an entity or a portion of an entity
9 licensed under the Nursing Home Care Act, the Specialized
10 Mental Health Rehabilitation Act of 2013, the ID/DD
11 Community Care Act, or the MC/DD Act, with the exception of
12 facilities operated by a county or Illinois Veterans Homes,
13 that elect to convert, in whole or in part, to an assisted
14 living or shared housing establishment licensed under the
15 Assisted Living and Shared Housing Act and with the
16 exception of a facility licensed under the Specialized
17 Mental Health Rehabilitation Act of 2013 in connection with
18 a proposal to close a facility and re-establish the
19 facility in another location.

20 (8) Any change of ownership of a health care facility
21 that is licensed under the Nursing Home Care Act, the
22 Specialized Mental Health Rehabilitation Act of 2013, the
23 ID/DD Community Care Act, or the MC/DD Act, with the
24 exception of facilities operated by a county or Illinois
25 Veterans Homes. Changes of ownership of facilities
26 licensed under the Nursing Home Care Act must meet the

1 requirements set forth in Sections 3-101 through 3-119 of
2 the Nursing Home Care Act.

3 With the exception of those health care facilities
4 specifically included in this Section, nothing in this Act
5 shall be intended to include facilities operated as a part of
6 the practice of a physician or other licensed health care
7 professional, whether practicing in his individual capacity or
8 within the legal structure of any partnership, medical or
9 professional corporation, or unincorporated medical or
10 professional group. Further, this Act shall not apply to
11 physicians or other licensed health care professional's
12 practices where such practices are carried out in a portion of
13 a health care facility under contract with such health care
14 facility by a physician or by other licensed health care
15 professionals, whether practicing in his individual capacity
16 or within the legal structure of any partnership, medical or
17 professional corporation, or unincorporated medical or
18 professional groups, unless the entity constructs, modifies,
19 or establishes a health care facility as specifically defined
20 in this Section. This Act shall apply to construction or
21 modification and to establishment by such health care facility
22 of such contracted portion which is subject to facility
23 licensing requirements, irrespective of the party responsible
24 for such action or attendant financial obligation.

25 "Person" means any one or more natural persons, legal
26 entities, governmental bodies other than federal, or any

1 combination thereof.

2 "Consumer" means any person other than a person (a) whose
3 major occupation currently involves or whose official capacity
4 within the last 12 months has involved the providing,
5 administering or financing of any type of health care facility,
6 (b) who is engaged in health research or the teaching of
7 health, (c) who has a material financial interest in any
8 activity which involves the providing, administering or
9 financing of any type of health care facility, or (d) who is or
10 ever has been a member of the immediate family of the person
11 defined by (a), (b), or (c).

12 "State Board" or "Board" means the Health Facilities and
13 Services Review Board.

14 "Construction or modification" means the establishment,
15 erection, building, alteration, reconstruction, modernization,
16 improvement, extension, discontinuation, change of ownership,
17 of or by a health care facility, or the purchase or acquisition
18 by or through a health care facility of equipment or service
19 for diagnostic or therapeutic purposes or for facility
20 administration or operation, or any capital expenditure made by
21 or on behalf of a health care facility which exceeds the
22 capital expenditure minimum; however, any capital expenditure
23 made by or on behalf of a health care facility for (i) the
24 construction or modification of a facility licensed under the
25 Assisted Living and Shared Housing Act or (ii) a conversion
26 project undertaken in accordance with Section 30 of the Older

1 Adult Services Act shall be excluded from any obligations under
2 this Act.

3 "Establish" means the construction of a health care
4 facility or the replacement of an existing facility on another
5 site or the initiation of a category of service.

6 "Major medical equipment" means medical equipment which is
7 used for the provision of medical and other health services and
8 which costs in excess of the capital expenditure minimum,
9 except that such term does not include medical equipment
10 acquired by or on behalf of a clinical laboratory to provide
11 clinical laboratory services if the clinical laboratory is
12 independent of a physician's office and a hospital and it has
13 been determined under Title XVIII of the Social Security Act to
14 meet the requirements of paragraphs (10) and (11) of Section
15 1861(s) of such Act. In determining whether medical equipment
16 has a value in excess of the capital expenditure minimum, the
17 value of studies, surveys, designs, plans, working drawings,
18 specifications, and other activities essential to the
19 acquisition of such equipment shall be included.

20 "Capital Expenditure" means an expenditure: (A) made by or
21 on behalf of a health care facility (as such a facility is
22 defined in this Act); and (B) which under generally accepted
23 accounting principles is not properly chargeable as an expense
24 of operation and maintenance, or is made to obtain by lease or
25 comparable arrangement any facility or part thereof or any
26 equipment for a facility or part; and which exceeds the capital

1 expenditure minimum.

2 For the purpose of this paragraph, the cost of any studies,
3 surveys, designs, plans, working drawings, specifications, and
4 other activities essential to the acquisition, improvement,
5 expansion, or replacement of any plant or equipment with
6 respect to which an expenditure is made shall be included in
7 determining if such expenditure exceeds the capital
8 expenditures minimum. Unless otherwise interdependent, or
9 submitted as one project by the applicant, components of
10 construction or modification undertaken by means of a single
11 construction contract or financed through the issuance of a
12 single debt instrument shall not be grouped together as one
13 project. Donations of equipment or facilities to a health care
14 facility which if acquired directly by such facility would be
15 subject to review under this Act shall be considered capital
16 expenditures, and a transfer of equipment or facilities for
17 less than fair market value shall be considered a capital
18 expenditure for purposes of this Act if a transfer of the
19 equipment or facilities at fair market value would be subject
20 to review.

21 "Capital expenditure minimum" means \$11,500,000 for
22 projects by hospital applicants, \$6,500,000 for applicants for
23 projects related to skilled and intermediate care long-term
24 care facilities licensed under the Nursing Home Care Act, and
25 \$3,000,000 for projects by all other applicants, which shall be
26 annually adjusted to reflect the increase in construction costs

1 due to inflation, for major medical equipment and for all other
2 capital expenditures.

3 "Financial Commitment" means the commitment of at least 33%
4 of total funds assigned to cover total project cost, which
5 occurs by the actual expenditure of 33% or more of the total
6 project cost or the commitment to expend 33% or more of the
7 total project cost by signed contracts or other legal means.

8 "Non-clinical service area" means an area (i) for the
9 benefit of the patients, visitors, staff, or employees of a
10 health care facility and (ii) not directly related to the
11 diagnosis, treatment, or rehabilitation of persons receiving
12 services from the health care facility. "Non-clinical service
13 areas" include, but are not limited to, chapels; gift shops;
14 news stands; computer systems; tunnels, walkways, and
15 elevators; telephone systems; projects to comply with life
16 safety codes; educational facilities; student housing;
17 patient, employee, staff, and visitor dining areas;
18 administration and volunteer offices; modernization of
19 structural components (such as roof replacement and masonry
20 work); boiler repair or replacement; vehicle maintenance and
21 storage facilities; parking facilities; mechanical systems for
22 heating, ventilation, and air conditioning; loading docks; and
23 repair or replacement of carpeting, tile, wall coverings,
24 window coverings or treatments, or furniture. Solely for the
25 purpose of this definition, "non-clinical service area" does
26 not include health and fitness centers.

1 "Areawide" means a major area of the State delineated on a
2 geographic, demographic, and functional basis for health
3 planning and for health service and having within it one or
4 more local areas for health planning and health service. The
5 term "region", as contrasted with the term "subregion", and the
6 word "area" may be used synonymously with the term "areawide".

7 "Local" means a subarea of a delineated major area that on
8 a geographic, demographic, and functional basis may be
9 considered to be part of such major area. The term "subregion"
10 may be used synonymously with the term "local".

11 "Physician" means a person licensed to practice in
12 accordance with the Medical Practice Act of 1987, as amended.

13 "Licensed health care professional" means a person
14 licensed to practice a health profession under pertinent
15 licensing statutes of the State of Illinois.

16 "Director" means the Director of the Illinois Department of
17 Public Health.

18 "Agency" or "Department" means the Illinois Department of
19 Public Health.

20 "Alternative health care model" means a facility or program
21 authorized under the Alternative Health Care Delivery Act.

22 "Out-of-state facility" means a person that is both (i)
23 licensed as a hospital or as an ambulatory surgery center under
24 the laws of another state or that qualifies as a hospital or an
25 ambulatory surgery center under regulations adopted pursuant
26 to the Social Security Act and (ii) not licensed under the

1 Ambulatory Surgical Treatment Center Act, the Hospital
2 Licensing Act, or the Nursing Home Care Act. Affiliates of
3 out-of-state facilities shall be considered out-of-state
4 facilities. Affiliates of Illinois licensed health care
5 facilities 100% owned by an Illinois licensed health care
6 facility, its parent, or Illinois physicians licensed to
7 practice medicine in all its branches shall not be considered
8 out-of-state facilities. Nothing in this definition shall be
9 construed to include an office or any part of an office of a
10 physician licensed to practice medicine in all its branches in
11 Illinois that is not required to be licensed under the
12 Ambulatory Surgical Treatment Center Act.

13 "Change of ownership of a health care facility" means a
14 change in the person who has ownership or control of a health
15 care facility's physical plant and capital assets. A change in
16 ownership is indicated by the following transactions: sale,
17 transfer, acquisition, lease, change of sponsorship, or other
18 means of transferring control.

19 "Related person" means any person that: (i) is at least 50%
20 owned, directly or indirectly, by either the health care
21 facility or a person owning, directly or indirectly, at least
22 50% of the health care facility; or (ii) owns, directly or
23 indirectly, at least 50% of the health care facility.

24 "Charity care" means care provided by a health care
25 facility for which the provider does not expect to receive
26 payment from the patient or a third-party payer.

1 "Freestanding emergency center" means a facility subject
2 to licensure under Section 32.5 of the Emergency Medical
3 Services (EMS) Systems Act.

4 "Category of service" means a grouping by generic class of
5 various types or levels of support functions, equipment, care,
6 or treatment provided to patients or residents, including, but
7 not limited to, classes such as medical-surgical, pediatrics,
8 or cardiac catheterization. A category of service may include
9 subcategories or levels of care that identify a particular
10 degree or type of care within the category of service. Nothing
11 in this definition shall be construed to include the practice
12 of a physician or other licensed health care professional while
13 functioning in an office providing for the care, diagnosis, or
14 treatment of patients. A category of service that is subject to
15 the Board's jurisdiction must be designated in rules adopted by
16 the Board.

17 "State Board Staff Report" means the document that sets
18 forth the review and findings of the State Board staff, as
19 prescribed by the State Board, regarding applications subject
20 to Board jurisdiction.

21 (Source: P.A. 99-78, eff. 7-20-15; 99-180, eff. 7-29-15;
22 99-527, eff. 1-1-17; 100-518, eff. 6-1-18.)

23 (20 ILCS 3960/13) (from Ch. 111 1/2, par. 1163)

24 (Section scheduled to be repealed on December 31, 2019)

25 Sec. 13. Investigation of applications for permits and

1 certificates of recognition. The State Board shall make or
2 cause to be made such investigations as it deems necessary in
3 connection with an application for a permit or an application
4 for a certificate of recognition, or in connection with a
5 determination of whether or not construction or modification
6 which has been commenced is in accord with the permit issued by
7 the State Board or whether construction or modification has
8 been commenced without a permit having been obtained. The State
9 Board may issue subpoenas duces tecum requiring the production
10 of records and may administer oaths to such witnesses.

11 Any circuit court of this State, upon the application of
12 the State Board or upon the application of any party to such
13 proceedings, may, in its discretion, compel the attendance of
14 witnesses, the production of books, papers, records, or
15 memoranda and the giving of testimony before the State Board,
16 by a proceeding as for contempt, or otherwise, in the same
17 manner as production of evidence may be compelled before the
18 court.

19 The State Board shall require all health facilities
20 operating in this State to provide such reasonable reports at
21 such times and containing such information as is needed by it
22 to carry out the purposes and provisions of this Act. Prior to
23 collecting information from health facilities, the State Board
24 shall make reasonable efforts through a public process to
25 consult with health facilities and associations that represent
26 them to determine whether data and information requests will

1 result in useful information for health planning, whether
2 sufficient information is available from other sources, and
3 whether data requested is routinely collected by health
4 facilities and is available without retrospective record
5 review. Data and information requests shall not impose undue
6 paperwork burdens on health care facilities and personnel.
7 Health facilities not complying with this requirement shall be
8 reported to licensing, accrediting, certifying, or payment
9 agencies as being in violation of State law. Health care
10 facilities and other parties at interest shall have reasonable
11 access, under rules established by the State Board, to all
12 planning information submitted in accord with this Act
13 pertaining to their area.

14 Among the reports to be required by the State Board are
15 facility questionnaires for health care facilities licensed
16 under the Ambulatory Surgical Treatment Center Act, the
17 Hospital Licensing Act, the Nursing Home Care Act, the ID/DD
18 Community Care Act, the MC/DD Act, or the Specialized Mental
19 Health Rehabilitation Act of 2013 and health care facilities
20 that are required to meet the requirements of 42 CFR 494 in
21 order to be certified for participation in Medicare and
22 Medicaid under Titles XVIII and XIX of the federal Social
23 Security Act ~~, or the End Stage Renal Disease Facility Act.~~
24 These questionnaires shall be conducted on an annual basis and
25 compiled by the State Board. For health care facilities
26 licensed under the Nursing Home Care Act or the Specialized

1 Mental Health Rehabilitation Act of 2013, these reports shall
2 include, but not be limited to, the identification of specialty
3 services provided by the facility to patients, residents, and
4 the community at large. Annual reports for facilities licensed
5 under the ID/DD Community Care Act and facilities licensed
6 under the MC/DD Act shall be different from the annual reports
7 required of other health care facilities and shall be specific
8 to those facilities licensed under the ID/DD Community Care Act
9 or the MC/DD Act. The Health Facilities and Services Review
10 Board shall consult with associations representing facilities
11 licensed under the ID/DD Community Care Act and associations
12 representing facilities licensed under the MC/DD Act when
13 developing the information requested in these annual reports.
14 For health care facilities that contain long term care beds,
15 the reports shall also include the number of staffed long term
16 care beds, physical capacity for long term care beds at the
17 facility, and long term care beds available for immediate
18 occupancy. For purposes of this paragraph, "long term care
19 beds" means beds (i) licensed under the Nursing Home Care Act,
20 (ii) licensed under the ID/DD Community Care Act, (iii)
21 licensed under the MC/DD Act, (iv) licensed under the Hospital
22 Licensing Act, or (v) licensed under the Specialized Mental
23 Health Rehabilitation Act of 2013 and certified as skilled
24 nursing or nursing facility beds under Medicaid or Medicare.
25 (Source: P.A. 98-1086, eff. 8-26-14; 99-180, eff. 7-29-15.)

1 (30 ILCS 105/5.590 rep.)

2 Section 10. The State Finance Act is amended by repealing
3 Section 5.590.

4 (210 ILCS 62/Act rep.)

5 Section 15. The End Stage Renal Disease Facility Act is
6 repealed.

7 Section 20. The Alzheimer's Disease and Related Dementias
8 Services Act is amended by changing Section 15 as follows:

9 (410 ILCS 406/15)

10 (For Act repeal see Section 90)

11 Sec. 15. Applicability. Programs covered by this Act
12 include, but are not limited to, health care facilities
13 licensed or certified by the Assisted Living and Shared Housing
14 Act; Life Care Facilities Act; Nursing Home Care Act;
15 Specialized Mental Health Rehabilitation Act of 2013; Home
16 Health, Home Services, and Home Nursing Agency Licensing Act;
17 and Hospice Program Licensing Act, ~~and End Stage Renal Disease~~
18 ~~Facility Act~~. This Act does not apply to physicians licensed to
19 practice medicine in all its branches.

20 (Source: P.A. 99-822, eff. 8-15-16.)

21 Section 95. No acceleration or delay. Where this Act makes
22 changes in a statute that is represented in this Act by text

1 that is not yet or no longer in effect (for example, a Section
2 represented by multiple versions), the use of that text does
3 not accelerate or delay the taking effect of (i) the changes
4 made by this Act or (ii) provisions derived from any other
5 Public Act.

6 Section 99. Effective date. This Act takes effect upon
7 becoming law.