

## Rep. LaToya Greenwood

## Filed: 3/16/2021

15

16

## 10200HB0207ham001 LRB102 10059 CPF 23062 a 1 AMENDMENT TO HOUSE BILL 207 2 AMENDMENT NO. . Amend House Bill 207 by replacing everything after the enacting clause with the following: 3 "Section 5. The Illinois Health Finance Reform Act is 4 5 amended by changing Section 4-4 as follows: 6 (20 ILCS 2215/4-4) (from Ch. 111 1/2, par. 6504-4) 7 Sec. 4-4. (a) Hospitals shall make available 8 prospective patients information on the normal charge incurred for any procedure or operation the prospective patient is 9 10 considering. Department of Public Health shall require 11 (b) 12 hospitals to post, either by physical or electronic means, in 13 prominent letters, in letters no more than one inch in height the established charges for services, where applicable, 14

including but not limited to the hospital's private room

charge, semi-private room charge, charge for a room with 3 or

- 1 more beds, intensive care room charges, emergency room charge,
- 2 operating room charge, electrocardiogram charge, anesthesia
- 3 charge, chest x-ray charge, blood sugar charge, blood
- 4 chemistry charge, tissue exam charge, blood typing charge and
- 5 Rh factor charge. The definitions of each charge to be posted
- 6 shall be determined by the Department.
- 7 (Source: P.A. 92-597, eff. 7-1-02.)
- 8 Section 10. The Hospital Licensing Act is amended by
- 9 changing Sections 6, 6.14c, 10.10, and 11.5 as follows:
- 10 (210 ILCS 85/6) (from Ch. 111 1/2, par. 147)
- 11 Sec. 6. (a) Upon receipt of an application for a permit to
- 12 establish a hospital the Director shall issue a permit if he
- 13 finds (1) that the applicant is fit, willing, and able to
- 14 provide a proper standard of hospital service for the
- 15 community with particular regard to the qualification,
- 16 background, and character of the applicant, (2) that the
- financial resources available to the applicant demonstrate an
- 18 ability to construct, maintain, and operate a hospital in
- 19 accordance with the standards, rules, and regulations adopted
- 20 pursuant to this Act, and (3) that safeguards are provided
- 21 which assure hospital operation and maintenance consistent
- 22 with the public interest having particular regard to safe,
- 23 adequate, and efficient hospital facilities and services.
- 24 The Director may request the cooperation of county and

- 1 multiple-county health departments, municipal boards of
- 2 health, and other governmental and non-governmental agencies
- 3 in obtaining information and in conducting investigations
- 4 relating to such applications.
- 5 A permit to establish a hospital shall be valid only for
- 6 the premises and person named in the application for such
- 7 permit and shall not be transferable or assignable.
- 8 In the event the Director issues a permit to establish a
- 9 hospital the applicant shall thereafter submit plans and
- 10 specifications to the Department in accordance with Section 8
- 11 of this Act.
- 12 (b) Upon receipt of an application for license to open,
- 13 conduct, operate, and maintain a hospital, the Director shall
- issue a license if he finds the applicant and the hospital
- 15 facilities comply with standards, rules, and regulations
- promulgated under this Act. A license, unless sooner suspended
- or revoked, shall be renewable annually upon approval by the
- 18 Department and payment of a license fee as established
- 19 pursuant to Section 5 of this Act. Each license shall be issued
- 20 only for the premises and persons named in the application and
- 21 shall not be transferable or assignable. Licenses shall be
- 22 posted, either by physical or electronic means, in a
- 23 conspicuous place on the licensed premises. The Department
- 24 may, either before or after the issuance of a license, request
- 25 the cooperation of the State Fire Marshal, county and multiple
- 26 county health departments, or municipal boards of health to

8

9

10

11

12

13

14

15

16

17

18

19

20

2.1

22

23

24

25

make investigations to determine if the applicant or licensee is complying with the minimum standards prescribed by the Department. The report and recommendations of any such agency shall be in writing and shall state with particularity its findings with respect to compliance or noncompliance with such minimum standards, rules, and regulations.

The Director may issue a provisional license to any hospital which does not substantially comply with provisions of this Act and the standards, rules, and regulations promulgated by virtue thereof provided that he finds that such hospital has undertaken changes corrections which upon completion will render the hospital in substantial compliance with the provisions of this Act, and the standards, rules, and regulations adopted hereunder, and provided that the health and safety of the patients of the hospital will be protected during the period for which such provisional license is issued. The Director shall advise the licensee of the conditions under which such provisional license is issued, including the manner in which the hospital facilities fail to comply with the provisions of the Act, standards, rules, and regulations, and the time within which the changes and corrections necessary for such hospital facilities to substantially comply with this Act, and the standards, rules, and regulations of the Department relating thereto shall be completed.

26 (Source: P.A. 98-683, eff. 6-30-14.)

1 (210 ILCS 85/6.14c)

6

7

8

9

10

Sec. 6.14c. Posting of information. Every hospital shall

3 conspicuously post, either by physical or electronic means,

4 for display in an area of its offices accessible to patients,

5 employees, and visitors the following:

- (1) its current license;
- (2) a description, provided by the Department, of complaint procedures established under this Act and the name, address, and telephone number of a person authorized by the Department to receive complaints;
- 11 (3) a list of any orders pertaining to the hospital 12 issued by the Department during the past year and any 13 court orders reviewing such Department orders issued 14 during the past year; and
- 15 (4) a list of the material available for public 16 inspection under Section 6.14d.

Each hospital shall post, either by physical or electronic

means, in each facility that has an emergency room, a notice in
a conspicuous location in the emergency room with information
about how to enroll in health insurance through the Illinois
health insurance marketplace in accordance with Sections 1311
and 1321 of the federal Patient Protection and Affordable Care
Act.

24 (Source: P.A. 101-117, eff. 1-1-20.)

1 (210 ILCS 85/10.10)

5

6

7

9

10

11

12

13

14

15

16

17

18

19

20

2.1

22

- 2 Sec. 10.10. Nurse Staffing by Patient Acuity.
- 3 (a) Findings. The Legislature finds and declares all of the following:
  - (1) The State of Illinois has a substantial interest in promoting quality care and improving the delivery of health care services.
    - (2) Evidence-based studies have shown that the basic principles of staffing in the acute care setting should be based on the complexity of patients' care needs aligned with available nursing skills to promote quality patient care consistent with professional nursing standards.
  - (3) Compliance with this Section promotes an organizational climate that values registered nurses' input in meeting the health care needs of hospital patients.
    - (b) Definitions. As used in this Section:
  - "Acuity model" means an assessment tool selected and implemented by a hospital, as recommended by a nursing care committee, that assesses the complexity of patient care needs requiring professional nursing care and skills and aligns patient care needs and nursing skills consistent with professional nursing standards.
- "Department" means the Department of Public Health.
- "Direct patient care" means care provided by a registered professional nurse with direct responsibility to oversee or

2.1

carry out medical regimens or nursing care for one or more patients.

"Nursing care committee" means an existing or newly created hospital-wide committee or committees of nurses whose functions, in part or in whole, contribute to the development, recommendation, and review of the hospital's nurse staffing plan established pursuant to subsection (d).

"Registered professional nurse" means a person licensed as a Registered Nurse under the Nurse Practice Act.

"Written staffing plan for nursing care services" means a written plan for guiding the assignment of patient care nursing staff based on multiple nurse and patient considerations that yield minimum staffing levels for inpatient care units and the adopted acuity model aligning patient care needs with nursing skills required for quality patient care consistent with professional nursing standards.

- (c) Written staffing plan.
- (1) Every hospital shall implement a written hospital-wide staffing plan, recommended by a nursing care committee or committees, that provides for minimum direct care professional registered nurse-to-patient staffing needs for each inpatient care unit. The written hospital-wide staffing plan shall include, but need not be limited to, the following considerations:
- (A) The complexity of complete care, assessment on patient admission, volume of patient admissions,

2.1

discharges and transfers, evaluation of the progress of a patient's problems, ongoing physical assessments, planning for a patient's discharge, assessment after a change in patient condition, and assessment of the need for patient referrals.

- (B) The complexity of clinical professional nursing judgment needed to design and implement a patient's nursing care plan, the need for specialized equipment and technology, the skill mix of other personnel providing or supporting direct patient care, and involvement in quality improvement activities, professional preparation, and experience.
- (C) Patient acuity and the number of patients for whom care is being provided.
- (D) The ongoing assessments of a unit's patient acuity levels and nursing staff needed shall be routinely made by the unit nurse manager or his or her designee.
- (E) The identification of additional registered nurses available for direct patient care when patients' unexpected needs exceed the planned workload for direct care staff.
- (2) In order to provide staffing flexibility to meet patient needs, every hospital shall identify an acuity model for adjusting the staffing plan for each inpatient care unit.

2.1

(3) The written staffing plan shall be posted, either
by physical or electronic means, in a conspicuous and
accessible location for both patients and direct care
staff, as required under the Hospital Report Card Act. A
copy of the written staffing plan shall be provided to any
member of the general public upon request.

## (d) Nursing care committee.

- (1) Every hospital shall have a nursing care committee. A hospital shall appoint members of a committee whereby at least 50% of the members are registered professional nurses providing direct patient care.
- (2) A nursing care committee's recommendations must be given significant regard and weight in the hospital's adoption and implementation of a written staffing plan.
- (3) A nursing care committee or committees shall recommend a written staffing plan for the hospital based on the principles from the staffing components set forth in subsection (c). In particular, a committee or committees shall provide input and feedback on the following:
  - (A) Selection, implementation, and evaluation of minimum staffing levels for inpatient care units.
  - (B) Selection, implementation, and evaluation of an acuity model to provide staffing flexibility that aligns changing patient acuity with nursing skills required.

- 1 (C) Selection, implementation, and evaluation of a written staffing plan incorporating the 2 described in subdivisions (c)(1) and (c)(2) of this 3 4 Section.
- 5 (D) Review the following: nurse-to-patient staffing guidelines for all inpatient areas; and 6 current acuity tools and measures in use. 7
- 8 (4) A nursing care committee must address the items 9 described in subparagraphs (A) through (D) of paragraph
- 10 (3) semi-annually.
- 11 (e) Nothing in this Section 10.10 shall be construed to
- limit, alter, or modify any of the terms, conditions, or 12
- 13 provisions of a collective bargaining agreement entered into
- 14 by the hospital.
- 15 (Source: P.A. 96-328, eff. 8-11-09; 97-423, eff. 1-1-12;
- 16 97-813, eff. 7-13-12.)
- 17 (210 ILCS 85/11.5)
- Sec. 11.5. Uniform standards of obstetrical 18
- 19 regardless of ability to pay.
- (a) No hospital may promulgate policies or implement 2.0
- 21 practices that determine differing standards of obstetrical
- 22 care based upon a patient's source of payment or ability to pay
- 23 for medical services.
- 24 (b) Each hospital shall develop a written policy statement
- 25 reflecting the requirements of subsection (a) and shall post,

- 1 either by physical or electronic means, written notices of
- 2 this policy in the obstetrical admitting areas of the hospital
- 3 by July 1, 2004. Notices posted pursuant to this Section shall
- 4 be posted in the predominant language or languages spoken in
- 5 the hospital's service area.
- 6 (Source: P.A. 93-981, eff. 8-23-04.)
- 7 Section 15. The Language Assistance Services Act is
- 8 amended by changing Section 15 as follows:
- 9 (210 ILCS 87/15)
- 10 Sec. 15. Language assistance services.
- 11 (a) To ensure access to health care information and
- services for limited-English-speaking or non-English-speaking
- 13 residents and deaf residents, a health facility must do the
- 14 following:
- 15 (1) Adopt and review annually a policy for providing
- language assistance services to patients with language or
- 17 communication barriers. The policy shall include
- 18 procedures for providing, to the extent possible as
- 19 determined by the facility, the use of an interpreter
- 20 whenever a language or communication barrier exists,
- 21 except where the patient, after being informed of the
- 22 availability of the interpreter service, chooses to use a
- family member or friend who volunteers to interpret. The
- 24 procedures shall be designed to maximize efficient use of

2

3

4

5

6

7

8

9

10

11

12

13

14

15

16

17

18

19

20

2.1

22

23

24

25

26

interpreters and minimize delays in providing interpreters to patients. The procedures shall insure, to the extent possible as determined by the facility, that interpreters are available, either on the premises or accessible by telephone, 24 hours a day. The facility shall annually transmit to the Department of Public Health a copy of the updated policy and shall include a description of the facility's efforts to insure adequate and speedy communication between patients with language communication barriers and staff.

Develop, and post, either by physical or (2) electronic means, in conspicuous locations, notices that advise patients and their families of the availability of interpreters, the procedure for obtaining an interpreter, and the telephone numbers to call for filing complaints concerning interpreter service problems, including, but not limited to, a TTY number for persons who are deaf or hard of hearing. The notices shall be posted, at a minimum, in the emergency room, the admitting area, the facility entrance, and the outpatient area. Notices shall inform patients that interpreter services are available on request, shall list the languages most encountered at the facility for which interpreter services are available, and shall instruct patients to direct complaints regarding interpreter services to Department of Public Health, including the telephone

6

7

8

9

10

11

12

13

14

15

16

17

18

19

20

2.1

22

23

24

2.5

- 1 numbers to call for that purpose.
- (3) Notify the facility's employees of the language 2 3 services available at the facility and train them on how to make those language services available to patients. 4
  - (b) In addition, a health facility may do one or more of the following:
    - (1) Identify and record a patient's primary language and dialect on one or more of the following: a patient medical chart, hospital bracelet, bedside notice, or nursing card.
    - Prepare and maintain, as needed, a list of (2)interpreters who have been identified as proficient in sign language according to the Interpreter for the Deaf Licensure Act of 2007 and a list of the languages of the population of the geographical area served by the facility.
    - (3) Review all standardized written forms, waivers, documents, and informational materials available to patients on admission to determine which to translate into languages other than English.
    - (4) Consider providing its nonbilingual staff with standardized picture and phrase sheets for use in routine communications with patients who have language communication barriers.
    - (5) Develop community liaison groups to enable the facility limited-English-speaking, and the

- 1 non-English-speaking, and deaf communities to ensure the
- adequacy of the interpreter services. 2
- (Source: P.A. 98-756, eff. 7-16-14.) 3
- 4 Section 20. The Fair Patient Billing Act is amended by
- 5 changing Section 15 as follows:
- (210 ILCS 88/15) 6
- 7 Sec. 15. Patient notification.
- 8 (a) Each hospital shall post a sign with the following
- 9 notice:
- "You may be eligible for financial assistance under 10
- 11 the terms and conditions the hospital offers to qualified
- patients. For more information contact [hospital financial 12
- 13 assistance representative]".
- 14 (b) The sign under subsection (a) shall be posted, either
- by physical or electronic means, conspicuously in the 15
- admission and registration areas of the hospital. 16
- 17 (c) The sign shall be in English, and in any other language
- 18 that is the primary language of at least 5% of the patients
- 19 served by the hospital annually.
- 20 (d) Each hospital that has a website must post a notice in
- 21 a prominent place on its website that financial assistance is
- 22 available at the hospital, a description of the financial
- 23 assistance application process, and a copy of the financial
- 24 assistance application.

- 1 (e) Within 180 days after the effective date of this
- 2 <u>amendatory Act of the 102nd General Assembly</u>, each Each
- 3 hospital must make available information regarding financial
- 4 assistance from the hospital in the form of either a brochure,
- 5 an application for financial assistance, or other written or
- 6 electronic material in the emergency room, material in the
- 7 hospital admission, or registration area.
- 8 (Source: P.A. 94-885, eff. 1-1-07.)
- 9 Section 25. The Health Care Violence Prevention Act is
- 10 amended by changing Section 15 as follows:
- 11 (210 ILCS 160/15)
- 12 Sec. 15. Workplace safety.
- 13 (a) A health care worker who contacts law enforcement or
- 14 files a report with law enforcement against a patient or
- individual because of workplace violence shall provide notice
- 16 to management of the health care provider by which he or she is
- employed within 3 days after contacting law enforcement or
- 18 filing the report.
- 19 (b) No management of a health care provider may discourage
- 20 a health care worker from exercising his or her right to
- 21 contact law enforcement or file a report with law enforcement
- 22 because of workplace violence.
- 23 (c) A health care provider that employs a health care
- 24 worker shall display a notice, either by physical or

- electronic means, stating that verbal aggression will not be 1
- tolerated and physical assault will be reported to law 2
- enforcement. 3
- 4 (d) The health care provider shall offer immediate
- 5 post-incident services for a health care worker directly
- involved in a workplace violence incident caused by patients 6
- or their visitors, including acute treatment and access to 7
- 8 psychological evaluation.
- 9 (Source: P.A. 100-1051, eff. 1-1-19.)
- 10 Section 30. The Medical Patient Rights Act is amended by
- changing Sections 3.4 and 5.2 as follows: 11
- (410 ILCS 50/3.4) 12
- 13 Sec. 3.4. Rights of women; pregnancy and childbirth.
- (a) In addition to any other right provided under this 14
- Act, every woman has the following rights with regard to 15
- pregnancy and childbirth: 16
- 17 (1) The right to receive health care before, during,
- 18 and after pregnancy and childbirth.
- (2) The right to receive care for her and her infant 19
- 20 that is consistent with generally accepted medical
- 21 standards.
- 22 (3) The right to choose a certified nurse midwife or
- 23 physician as her maternity care professional.
- 24 (4) The right to choose her birth setting from the

4

5

6

7

8

9

10

11

12

13

14

15

16

17

18

19

20

2.1

22

23

24

25

- full range of birthing options available in her community. 1
  - (5) The right to leave her maternity care professional and select another if she becomes dissatisfied with her care, except as otherwise provided by law.
    - (6) The right to receive information about the names of those health care professionals involved in her care.
    - (7) The right to privacy and confidentiality of records, except as provided by law.
    - (8) The right to receive information concerning her condition and proposed treatment, including methods of relieving pain.
    - (9) The right to accept or refuse any treatment, to the extent medically possible.
    - (10) The right to be informed if her caregivers wish to enroll her or her infant in a research study in accordance with Section 3.1 of this Act.
    - (11) The right to access her medical records in accordance with Section 8-2001 of the Code of Civil Procedure.
    - (12) The right to receive information in a language in which she can communicate in accordance with federal law.
    - (13) The right to receive emotional and physical support during labor and birth.
    - (14) The right to freedom of movement during labor and to give birth in the position of her choice, within generally accepted medical standards.

2.1

L	(1	5)	The	righ	nt to	o con	tact	with	her	newbo	rn, ex	cept
2	where	nec	essa	ry o	care	must	be	provid	ed t	o the	mother	or
3	infant	-										

- (16) The right to receive information about breastfeeding.
- (17) The right to decide collaboratively with caregivers when she and her baby will leave the birth site for home, based on their conditions and circumstances.
- (18) The right to be treated with respect at all times before, during, and after pregnancy by her health care professionals.
- of payment, to examine and receive a reasonable explanation of her total bill for services rendered by her maternity care professional or health care provider, including itemized charges for specific services received. Each maternity care professional or health care provider shall be responsible only for a reasonable explanation of those specific services provided by the maternity care professional or health care provider.
- (b) The Department of Public Health, Department of Healthcare and Family Services, Department of Children and Family Services, and Department of Human Services shall post, either by physical or electronic means, information about these rights on their publicly available websites. Every health care provider, day care center licensed under the Child

- 1 Care Act of 1969, Head Start, and community center shall post
- 2 information about these rights in a prominent place and on
- 3 their websites, if applicable.
- 4 (c) The Department of Public Health shall adopt rules to
- 5 implement this Section.
- 6 (d) Nothing in this Section or any rules adopted under
- 7 subsection (c) shall be construed to require a physician,
- 8 health care professional, hospital, hospital affiliate, or
- 9 health care provider to provide care inconsistent with
- 10 generally accepted medical standards or available capabilities
- 11 or resources.
- 12 (Source: P.A. 101-445, eff. 1-1-20.)
- 13 (410 ILCS 50/5.2)
- 14 Sec. 5.2. Emergency room anti-discrimination notice. Every
- hospital shall post, either by physical or electronic means, a
- sign next to or in close proximity of its sign required by
- 17 Section 489.20 (q)(1) of Title 42 of the Code of Federal
- 18 Regulations stating the following:
- "You have the right not to be discriminated against by the
- 20 hospital due to your race, color, or national origin if these
- 21 characteristics are unrelated to your diagnosis or treatment.
- 22 If you believe this right has been violated, please call
- 23 (insert number for hospital grievance officer).".
- 24 (Source: P.A. 97-485, eff. 8-22-11.)

- 1 Section 35. The Abandoned Newborn Infant Protection Act is
- 2 amended by changing Section 22 as follows:
- 3 (325 ILCS 2/22)
- 4 Sec. 22. Signs. Every hospital, fire station, emergency
- 5 medical facility, and police station that is required to
- 6 accept a relinquished newborn infant in accordance with this
- 7 Act must post, either by physical or electronic means, a sign
- 8 in a conspicuous place on the exterior of the building housing
- 9 the facility informing persons that a newborn infant may be
- 10 relinquished at the facility in accordance with this Act. The
- 11 Department shall prescribe specifications for the signs and
- 12 for their placement that will ensure statewide uniformity.
- This Section does not apply to a hospital, fire station,
- 14 emergency medical facility, or police station that has a sign
- 15 that is consistent with the requirements of this Section that
- is posted on the effective date of this amendatory Act of the
- 17 95th General Assembly.
- 18 (Source: P.A. 95-275, eff. 8-17-07.)
- 19 Section 40. The Crime Victims Compensation Act is amended
- 20 by changing Section 5.1 as follows:
- 21 (740 ILCS 45/5.1) (from Ch. 70, par. 75.1)
- Sec. 5.1. (a) Every hospital licensed under the laws of
- 23 this State shall display prominently in its emergency room

- 1 posters giving notification of the existence and general
- provisions of this Act. The posters may be displayed by 2
- physical or electronic means. Such posters shall be provided 3
- 4 by the Attorney General.
- 5 (b) Any law enforcement agency that investigates an
- 6 offense committed in this State shall inform the victim of the
- offense or his dependents concerning the availability of an 7
- 8 award of compensation and advise such persons that any
- 9 information concerning this Act and the filing of a claim may
- 10 be obtained from the office of the Attorney General.
- (Source: P.A. 81-1013.) 11
- 12 Section 45. The Human Trafficking Resource Center Notice
- 13 Act is amended by changing Sections 5 and 10 as follows:
- 14 (775 ILCS 50/5)
- 15 Sec. 5. Posted notice required.
- 16 Each of the following businesses (a) and other
- 17 establishments shall, upon the availability of the model
- 18 notice described in Section 15 of this Act, post a notice that
- 19 complies with the requirements of this Act in a conspicuous
- 20 place near the public entrance of the establishment or in
- 21 another conspicuous location in clear view of the public and
- 22 employees where similar notices are customarily posted:
- 2.3 (1) On premise consumption retailer licensees under
- 24 the Liquor Control Act of 1934 where the sale of alcoholic

4

5

6

7

8

9

10

11

12

13

14

15

16

17

18

19

20

2.1

22

23

24

25

- 1 liquor is the principal business carried on by the licensee at the premises and primary to the sale of food. 2
  - (2) Adult entertainment facilities, as defined in Section 5-1097.5 of the Counties Code.
  - (3) Primary airports, as defined in Section 47102(16) of Title 49 of the United States Code.
    - (4) Intercity passenger rail or light rail stations.
    - (5) Bus stations.
  - (6) Truck stops. For purposes of this Act, "truck stop" means a privately-owned and operated facility that provides food, fuel, shower or other sanitary facilities, and lawful overnight truck parking.
  - Emergency rooms within general acute (7) hospitals, in which case the notice may be posted by electronic means.
  - (8) Urgent care centers, in which case the notice may be posted by electronic means.
  - (9) Farm labor contractors. For purposes of this Act, "farm labor contractor" means: (i) any person who for a fee or other valuable consideration recruits, supplies, or hires, or transports in connection therewith, into or within the State, any farmworker not of the contractor's immediate family to work for, or under the direction, supervision, or control of, a third person; or (ii) any person who for a fee or other valuable consideration recruits, supplies, or hires, or transports in connection

2.1

therewith, into or within the State, any farmworker not of the contractor's immediate family, and who for a fee or other valuable consideration directs, supervises, or controls all or any part of the work of the farmworker or who disburses wages to the farmworker. However, "farm labor contractor" does not include full-time regular employees of food processing companies when the employees are engaged in recruiting for the companies if those employees are not compensated according to the number of farmworkers they recruit.

- (10) Privately-operated job recruitment centers.
- "massage establishment" means a place of business in which any method of massage therapy is administered or practiced for compensation. "Massage establishment" does not include: an establishment at which persons licensed under the Medical Practice Act of 1987, the Illinois Physical Therapy Act, or the Naprapathic Practice Act engage in practice under one of those Acts; a business owned by a sole licensed massage therapist; or a cosmetology or esthetics salon registered under the Barber, Cosmetology, Esthetics, Hair Braiding, and Nail Technology Act of 1985.
- (b) The Department of Transportation shall, upon the availability of the model notice described in Section 15 of this Act, post a notice that complies with the requirements of this Act in a conspicuous place near the public entrance of

- each roadside rest area or in another conspicuous location in clear view of the public and employees where similar notices
- 3 are customarily posted.

2.1

- (c) The owner of a hotel or motel shall, upon the availability of the model notice described in Section 15 of this Act, post a notice that complies with the requirements of this Act in a conspicuous and accessible place in or about the premises in clear view of the employees where similar notices are customarily posted.
  - (d) The organizer of a public gathering or special event that is conducted on property open to the public and requires the issuance of a permit from the unit of local government shall post a notice that complies with the requirements of this Act in a conspicuous and accessible place in or about the premises in clear view of the public and employees where similar notices are customarily posted.
  - (e) The administrator of a public or private elementary school or public or private secondary school shall post a printout of the downloadable notice provided by the Department of Human Services under Section 15 that complies with the requirements of this Act in a conspicuous and accessible place chosen by the administrator in the administrative office or another location in view of school employees. School districts and personnel are not subject to the penalties provided under subsection (a) of Section 20.
    - (f) The owner of an establishment registered under the

- 1 Tattoo and Body Piercing Establishment Registration Act shall
- post a notice that complies with the requirements of this Act 2
- in a conspicuous and accessible place in clear view of 3
- 4 establishment employees.
- 5 (Source: P.A. 99-99, eff. 1-1-16; 99-565, eff. 7-1-17;
- 100-671, eff. 1-1-19.) 6
- 7 (775 ILCS 50/10)
- 8 Sec. 10. Form of posted notice.
- 9 (a) The notice required under this Act shall be at least 8
- 10 1/2 inches by 11 inches in size, written in a 16-point font,
- except that when the notice is provided by electronic means 11
- 12 the size of the notice and font shall not be required to comply
- 13 with these specifications, and shall state the following:
- 14 "If you or someone you know is being forced to engage in any
- activity and cannot leave, whether it is commercial sex, 15
- housework, farm work, construction, factory, retail, or 16
- restaurant work, or any other activity, call the National 17
- 18 Human Trafficking Resource Center at 1-888-373-7888 to access
- help and services. 19
- 20 Victims of slavery and human trafficking are protected under
- 21 United States and Illinois law. The hotline is:
- \* Available 24 hours a day, 7 days a week. 2.2
- 23 \* Toll-free.

- \* Operated by nonprofit nongovernmental organizations. 1
- \* Anonymous and confidential. 2
- \* Accessible in more than 160 languages. 3
- \* Able to provide help, referral to services, 4
- 5 training, and general information.".
- (b) The notice shall be printed in English, Spanish, and 6 7 in one other language that is the most widely spoken language
- 8 in the county where the establishment is located and for which
- 9 translation is mandated by the federal Voting Rights Act, as
- applicable. This subsection does not require a business or 10
- 11 other establishment in a county where a language other than
- 12 English or Spanish is the most widely spoken language to print
- the notice in more than one language in addition to English and 13
- 14 Spanish.
- (Source: P.A. 99-99, eff. 1-1-16.)". 15