



Sen. Rachelle Crowe

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10200SB0970sam001

LRB102 04884 CPF 36919 a

1 AMENDMENT TO SENATE BILL 970

2 AMENDMENT NO. _____. Amend Senate Bill 970 by replacing
3 everything after the enacting clause with the following:

4 "Section 5. The Sexual Assault Survivors Emergency
5 Treatment Act is amended by changing Sections 1a, 1a-1, 2,
6 2-1, 2.1, 2.1-1, 5, 5-1, and 5.4 as follows:

7 (410 ILCS 70/1a) (from Ch. 111 1/2, par. 87-1a)

8 Sec. 1a. Definitions.

9 (a) In this Act:

10 "Advanced practice registered nurse" has the meaning
11 provided in Section 50-10 of the Nurse Practice Act.

12 "Ambulance provider" means an individual or entity that
13 owns and operates a business or service using ambulances or
14 emergency medical services vehicles to transport emergency
15 patients.

16 "Approved pediatric health care facility" means a health

1 care facility, other than a hospital, with a sexual assault
2 treatment plan approved by the Department to provide medical
3 forensic services to: (A) pediatric sexual assault survivors
4 who present with a complaint of sexual assault within a
5 minimum of 96 hours ~~the last 7 days~~ or who have disclosed past
6 sexual assault by a specific individual and were in the care of
7 that individual within a minimum of 96 hours; and (B) sexual
8 assault survivors at least 13 years of age but under 18 years
9 of age who present with a complaint of sexual assault within a
10 minimum of the last 7 days or who have disclosed past sexual
11 assault by a specific individual and were in the care of that
12 individual within a minimum of the last 7 days.

13 "Areawide sexual assault treatment plan" means a plan,
14 developed by hospitals or by hospitals and approved pediatric
15 health care facilities in a community or area to be served,
16 which provides for medical forensic services to sexual assault
17 survivors that shall be made available by each of the
18 participating hospitals and approved pediatric health care
19 facilities.

20 "Board-certified child abuse pediatrician" means a
21 physician certified by the American Board of Pediatrics in
22 child abuse pediatrics.

23 "Board-eligible child abuse pediatrician" means a
24 physician who has completed the requirements set forth by the
25 American Board of Pediatrics to take the examination for
26 certification in child abuse pediatrics.

1 "Department" means the Department of Public Health.

2 "Emergency contraception" means medication as approved by
3 the federal Food and Drug Administration (FDA) that can
4 significantly reduce the risk of pregnancy if taken within 72
5 hours after sexual assault.

6 "Follow-up healthcare" means healthcare services related
7 to a sexual assault, including laboratory services and
8 pharmacy services, rendered within 90 days of the initial
9 visit for medical forensic services.

10 "Health care professional" means a physician, a physician
11 assistant, a sexual assault forensic examiner, an advanced
12 practice registered nurse, a registered professional nurse, a
13 licensed practical nurse, or a sexual assault nurse examiner.

14 "Hospital" means a hospital licensed under the Hospital
15 Licensing Act or operated under the University of Illinois
16 Hospital Act, any outpatient center included in the hospital's
17 sexual assault treatment plan where hospital employees provide
18 medical forensic services, and an out-of-state hospital that
19 has consented to the jurisdiction of the Department under
20 Section 2.06.

21 "Illinois State Police Sexual Assault Evidence Collection
22 Kit" means a prepackaged set of materials and forms to be used
23 for the collection of evidence relating to sexual assault. The
24 standardized evidence collection kit for the State of Illinois
25 shall be the Illinois State Police Sexual Assault Evidence
26 Collection Kit.

1 "Law enforcement agency having jurisdiction" means the law
2 enforcement agency in the jurisdiction where an alleged sexual
3 assault or sexual abuse occurred.

4 "Licensed practical nurse" has the meaning provided in
5 Section 50-10 of the Nurse Practice Act.

6 "Medical forensic services" means health care delivered to
7 patients within or under the care and supervision of personnel
8 working in a designated emergency department of a hospital or
9 an approved pediatric health care facility. "Medical forensic
10 services" includes, but is not limited to, taking a medical
11 history, performing photo documentation, performing a physical
12 and anogenital examination, assessing the patient for evidence
13 collection, collecting evidence in accordance with a statewide
14 sexual assault evidence collection program administered by the
15 Illinois State Police using the Illinois State Police Sexual
16 Assault Evidence Collection Kit, if appropriate, assessing the
17 patient for drug-facilitated or alcohol-facilitated sexual
18 assault, providing an evaluation of and care for sexually
19 transmitted infection and human immunodeficiency virus (HIV),
20 pregnancy risk evaluation and care, and discharge and
21 follow-up healthcare planning.

22 "Pediatric health care facility" means a clinic or
23 physician's office that provides medical services to pediatric
24 patients, to pediatric sexual assault survivors, and to sexual
25 assault survivors at least 13 years of age but under 18 years
26 of age.

1 "Pediatric sexual assault survivor" means a person under
2 the age of 13 who presents for medical forensic services in
3 relation to injuries or trauma resulting from a sexual
4 assault.

5 "Photo documentation" means digital photographs or
6 colposcope videos stored and backed up securely in the
7 original file format.

8 "Physician" means a person licensed to practice medicine
9 in all its branches.

10 "Physician assistant" has the meaning provided in Section
11 4 of the Physician Assistant Practice Act of 1987.

12 "Prepubescent sexual assault survivor" means a female who
13 is under the age of 18 years and has not had a first menstrual
14 cycle or a male who is under the age of 18 years and has not
15 started to develop secondary sex characteristics who presents
16 for medical forensic services in relation to injuries or
17 trauma resulting from a sexual assault.

18 "Qualified medical provider" means a board-certified child
19 abuse pediatrician, board-eligible child abuse pediatrician, a
20 sexual assault forensic examiner, or a sexual assault nurse
21 examiner who has access to photo documentation tools, and who
22 participates in peer review.

23 "Registered Professional Nurse" has the meaning provided
24 in Section 50-10 of the Nurse Practice Act.

25 "Sexual assault" means:

26 (1) an act of sexual conduct; as used in this

1 paragraph, "sexual conduct" has the meaning provided under
2 Section 11-0.1 of the Criminal Code of 2012; or

3 (2) any act of sexual penetration; as used in this
4 paragraph, "sexual penetration" has the meaning provided
5 under Section 11-0.1 of the Criminal Code of 2012 and
6 includes, without limitation, acts prohibited under
7 Sections 11-1.20 through 11-1.60 of the Criminal Code of
8 2012.

9 "Sexual assault forensic examiner" means a physician or
10 physician assistant who has completed training that meets or
11 is substantially similar to the Sexual Assault Nurse Examiner
12 Education Guidelines established by the International
13 Association of Forensic Nurses.

14 "Sexual assault nurse examiner" means an advanced practice
15 registered nurse or registered professional nurse who has
16 completed a sexual assault nurse examiner training program
17 that meets the Sexual Assault Nurse Examiner Education
18 Guidelines established by the International Association of
19 Forensic Nurses.

20 "Sexual assault services voucher" means a document
21 generated by a hospital or approved pediatric health care
22 facility at the time the sexual assault survivor receives
23 outpatient medical forensic services that may be used to seek
24 payment for any ambulance services, medical forensic services,
25 laboratory services, pharmacy services, and follow-up
26 healthcare provided as a result of the sexual assault.

1 "Sexual assault survivor" means a person who presents for
2 medical forensic services in relation to injuries or trauma
3 resulting from a sexual assault.

4 "Sexual assault transfer plan" means a written plan
5 developed by a hospital and approved by the Department, which
6 describes the hospital's procedures for transferring sexual
7 assault survivors to another hospital, and an approved
8 pediatric health care facility, if applicable, in order to
9 receive medical forensic services.

10 "Sexual assault treatment plan" means a written plan that
11 describes the procedures and protocols for providing medical
12 forensic services to sexual assault survivors who present
13 themselves for such services, either directly or through
14 transfer from a hospital or an approved pediatric health care
15 facility.

16 "Transfer hospital" means a hospital with a sexual assault
17 transfer plan approved by the Department.

18 "Transfer services" means the appropriate medical
19 screening examination and necessary stabilizing treatment
20 prior to the transfer of a sexual assault survivor to a
21 hospital or an approved pediatric health care facility that
22 provides medical forensic services to sexual assault survivors
23 pursuant to a sexual assault treatment plan or areawide sexual
24 assault treatment plan.

25 "Treatment hospital" means a hospital with a sexual
26 assault treatment plan approved by the Department to provide

1 medical forensic services to: (A) all sexual assault survivors
2 13 years of age or older who present with a complaint of sexual
3 assault within a minimum of the last 7 days or who have
4 disclosed past sexual assault by a specific individual and
5 were in the care of that individual within a minimum of the
6 last 7 days; and (B) pediatric sexual assault survivors who
7 present with a complaint of sexual assault within a minimum of
8 96 hours or who have disclosed past sexual assault by a
9 specific individual and were in the care of that individual
10 within a minimum of 96 hours.

11 "Treatment hospital with approved pediatric transfer"
12 means a hospital with a treatment plan approved by the
13 Department to provide medical forensic services to sexual
14 assault survivors 13 years old or older who present with a
15 complaint of sexual assault within a minimum of the last 7 days
16 or who have disclosed past sexual assault by a specific
17 individual and were in the care of that individual within a
18 minimum of the last 7 days.

19 (b) This Section is effective on and after January 1, 2024
20 ~~2022~~.

21 (Source: P.A. 101-81, eff. 7-12-19; 101-634, eff. 6-5-20;
22 102-22, eff. 6-25-21; 102-538, eff. 8-20-21; 102-674, eff.
23 11-30-21; revised 12-16-21.)

24 (410 ILCS 70/1a-1)

25 (Section scheduled to be repealed on December 31, 2023)

1 Sec. 1a-1. Definitions.

2 (a) In this Act:

3 "Advanced practice registered nurse" has the meaning
4 provided in Section 50-10 of the Nurse Practice Act.

5 "Ambulance provider" means an individual or entity that
6 owns and operates a business or service using ambulances or
7 emergency medical services vehicles to transport emergency
8 patients.

9 "Approved pediatric health care facility" means a health
10 care facility, other than a hospital, with a sexual assault
11 treatment plan approved by the Department to provide medical
12 forensic services to: (A) pediatric sexual assault survivors
13 who present with a complaint of sexual assault within a
14 minimum of 96 hours ~~the last 7 days~~ or who have disclosed past
15 sexual assault by a specific individual and were in the care of
16 that individual within a minimum of 96 hours; and (B) sexual
17 assault survivors at least 13 years of age but under 18 years
18 of age who present with a complaint of sexual assault within a
19 minimum of the last 7 days or who have disclosed past sexual
20 assault by a specific individual and were in the care of that
21 individual within a minimum of the last 7 days.

22 "Approved federally qualified health center" means a
23 facility as defined in Section 1905(1)(2)(B) of the federal
24 Social Security Act with a sexual assault treatment plan
25 approved by the Department to provide medical forensic
26 services to: (A) sexual assault survivors 13 years old or

1 older who present with a complaint of sexual assault within a
2 minimum of the last 7 days or who have disclosed past sexual
3 assault by a specific individual and were in the care of that
4 individual within a minimum of the last 7 days; and (B)
5 pediatric sexual assault survivors who present with a
6 complaint of sexual assault within a minimum of 96 hours or who
7 have disclosed past sexual assault by a specific individual
8 and were in the care of that individual within a minimum of 96
9 hours.

10 "Areawide sexual assault treatment plan" means a plan,
11 developed by hospitals or by hospitals, approved pediatric
12 health care facilities, and approved federally qualified
13 health centers in a community or area to be served, which
14 provides for medical forensic services to sexual assault
15 survivors that shall be made available by each of the
16 participating hospitals and approved pediatric health care
17 facilities.

18 "Board-certified child abuse pediatrician" means a
19 physician certified by the American Board of Pediatrics in
20 child abuse pediatrics.

21 "Board-eligible child abuse pediatrician" means a
22 physician who has completed the requirements set forth by the
23 American Board of Pediatrics to take the examination for
24 certification in child abuse pediatrics.

25 "Department" means the Department of Public Health.

26 "Emergency contraception" means medication as approved by

1 the federal Food and Drug Administration (FDA) that can
2 significantly reduce the risk of pregnancy if taken within 72
3 hours after sexual assault.

4 "Federally qualified health center" means a facility as
5 defined in Section 1905(1)(2)(B) of the federal Social
6 Security Act that provides primary care or sexual health
7 services.

8 "Follow-up healthcare" means healthcare services related
9 to a sexual assault, including laboratory services and
10 pharmacy services, rendered within 90 days of the initial
11 visit for medical forensic services.

12 "Health care professional" means a physician, a physician
13 assistant, a sexual assault forensic examiner, an advanced
14 practice registered nurse, a registered professional nurse, a
15 licensed practical nurse, or a sexual assault nurse examiner.

16 "Hospital" means a hospital licensed under the Hospital
17 Licensing Act or operated under the University of Illinois
18 Hospital Act, any outpatient center included in the hospital's
19 sexual assault treatment plan where hospital employees provide
20 medical forensic services, and an out-of-state hospital that
21 has consented to the jurisdiction of the Department under
22 Section 2.06-1.

23 "Illinois State Police Sexual Assault Evidence Collection
24 Kit" means a prepackaged set of materials and forms to be used
25 for the collection of evidence relating to sexual assault. The
26 standardized evidence collection kit for the State of Illinois

1 shall be the Illinois State Police Sexual Assault Evidence
2 Collection Kit.

3 "Law enforcement agency having jurisdiction" means the law
4 enforcement agency in the jurisdiction where an alleged sexual
5 assault or sexual abuse occurred.

6 "Licensed practical nurse" has the meaning provided in
7 Section 50-10 of the Nurse Practice Act.

8 "Medical forensic services" means health care delivered to
9 patients within or under the care and supervision of personnel
10 working in a designated emergency department of a hospital,
11 approved pediatric health care facility, or an approved
12 federally qualified health centers.

13 "Medical forensic services" includes, but is not limited
14 to, taking a medical history, performing photo documentation,
15 performing a physical and anogenital examination, assessing
16 the patient for evidence collection, collecting evidence in
17 accordance with a statewide sexual assault evidence collection
18 program administered by the Department of State Police using
19 the Illinois State Police Sexual Assault Evidence Collection
20 Kit, if appropriate, assessing the patient for
21 drug-facilitated or alcohol-facilitated sexual assault,
22 providing an evaluation of and care for sexually transmitted
23 infection and human immunodeficiency virus (HIV), pregnancy
24 risk evaluation and care, and discharge and follow-up
25 healthcare planning.

26 "Pediatric health care facility" means a clinic or

1 physician's office that provides medical services to pediatric
2 patients, to pediatric sexual assault survivors, and to sexual
3 assault survivors at least 13 years of age but under 18 years
4 of age.

5 "Pediatric sexual assault survivor" means a person under
6 the age of 13 who presents for medical forensic services in
7 relation to injuries or trauma resulting from a sexual
8 assault.

9 "Photo documentation" means digital photographs or
10 colposcope videos stored and backed up securely in the
11 original file format.

12 "Physician" means a person licensed to practice medicine
13 in all its branches.

14 "Physician assistant" has the meaning provided in Section
15 4 of the Physician Assistant Practice Act of 1987.

16 "Prepubescent sexual assault survivor" means a female who
17 is under the age of 18 years and has not had a first menstrual
18 cycle or a male who is under the age of 18 years and has not
19 started to develop secondary sex characteristics who presents
20 for medical forensic services in relation to injuries or
21 trauma resulting from a sexual assault.

22 "Qualified medical provider" means a board-certified child
23 abuse pediatrician, board-eligible child abuse pediatrician, a
24 sexual assault forensic examiner, or a sexual assault nurse
25 examiner who has access to photo documentation tools, and who
26 participates in peer review.

1 "Registered Professional Nurse" has the meaning provided
2 in Section 50-10 of the Nurse Practice Act.

3 "Sexual assault" means:

4 (1) an act of sexual conduct; as used in this
5 paragraph, "sexual conduct" has the meaning provided under
6 Section 11-0.1 of the Criminal Code of 2012; or

7 (2) any act of sexual penetration; as used in this
8 paragraph, "sexual penetration" has the meaning provided
9 under Section 11-0.1 of the Criminal Code of 2012 and
10 includes, without limitation, acts prohibited under
11 Sections 11-1.20 through 11-1.60 of the Criminal Code of
12 2012.

13 "Sexual assault forensic examiner" means a physician or
14 physician assistant who has completed training that meets or
15 is substantially similar to the Sexual Assault Nurse Examiner
16 Education Guidelines established by the International
17 Association of Forensic Nurses.

18 "Sexual assault nurse examiner" means an advanced practice
19 registered nurse or registered professional nurse who has
20 completed a sexual assault nurse examiner training program
21 that meets the Sexual Assault Nurse Examiner Education
22 Guidelines established by the International Association of
23 Forensic Nurses.

24 "Sexual assault services voucher" means a document
25 generated by a hospital or approved pediatric health care
26 facility at the time the sexual assault survivor receives

1 outpatient medical forensic services that may be used to seek
2 payment for any ambulance services, medical forensic services,
3 laboratory services, pharmacy services, and follow-up
4 healthcare provided as a result of the sexual assault.

5 "Sexual assault survivor" means a person who presents for
6 medical forensic services in relation to injuries or trauma
7 resulting from a sexual assault.

8 "Sexual assault transfer plan" means a written plan
9 developed by a hospital and approved by the Department, which
10 describes the hospital's procedures for transferring sexual
11 assault survivors to another hospital, and an approved
12 pediatric health care facility, if applicable, in order to
13 receive medical forensic services.

14 "Sexual assault treatment plan" means a written plan that
15 describes the procedures and protocols for providing medical
16 forensic services to sexual assault survivors who present
17 themselves for such services, either directly or through
18 transfer from a hospital or an approved pediatric health care
19 facility.

20 "Transfer hospital" means a hospital with a sexual assault
21 transfer plan approved by the Department.

22 "Transfer services" means the appropriate medical
23 screening examination and necessary stabilizing treatment
24 prior to the transfer of a sexual assault survivor to a
25 hospital or an approved pediatric health care facility that
26 provides medical forensic services to sexual assault survivors

1 pursuant to a sexual assault treatment plan or areawide sexual
2 assault treatment plan.

3 "Treatment hospital" means a hospital with a sexual
4 assault treatment plan approved by the Department to provide
5 medical forensic services to: (A) all sexual assault survivors
6 13 years of age or older who present with a complaint of sexual
7 assault within a minimum of the last 7 days or who have
8 disclosed past sexual assault by a specific individual and
9 were in the care of that individual within a minimum of the
10 last 7 days; and (B) pediatric sexual assault survivors who
11 present with a complaint of sexual assault within a minimum of
12 96 hours or who have disclosed past sexual assault by a
13 specific individual and were in the care of that individual
14 within a minimum of 96 hours.

15 "Treatment hospital with approved pediatric transfer"
16 means a hospital with a treatment plan approved by the
17 Department to provide medical forensic services to sexual
18 assault survivors 13 years old or older who present with a
19 complaint of sexual assault within a minimum of the last 7 days
20 or who have disclosed past sexual assault by a specific
21 individual and were in the care of that individual within a
22 minimum of the last 7 days.

23 (b) This Section is repealed on December 31, 2023.

24 (Source: P.A. 101-634, eff. 6-5-20; 102-22, eff. 6-25-21;
25 102-674, eff. 11-30-21.)

1 (410 ILCS 70/2) (from Ch. 111 1/2, par. 87-2)

2 Sec. 2. Hospital and approved pediatric health care
3 facility requirements for sexual assault plans.

4 (a) Every hospital required to be licensed by the
5 Department pursuant to the Hospital Licensing Act, or operated
6 under the University of Illinois Hospital Act that provides
7 general medical and surgical hospital services shall provide
8 either (i) transfer services to all sexual assault survivors,
9 (ii) medical forensic services to all sexual assault
10 survivors, or (iii) transfer services to pediatric sexual
11 assault survivors and medical forensic services to sexual
12 assault survivors 13 years old or older, in accordance with
13 rules adopted by the Department.

14 In addition, every such hospital, regardless of whether or
15 not a request is made for reimbursement, shall submit to the
16 Department a plan to provide either (i) transfer services to
17 all sexual assault survivors, (ii) medical forensic services
18 to all sexual assault survivors, or (iii) transfer services to
19 pediatric sexual assault survivors and medical forensic
20 services to sexual assault survivors 13 years old or older.
21 The Department shall approve such plan for either (i) transfer
22 services to all sexual assault survivors, (ii) medical
23 forensic services to all sexual assault survivors, or (iii)
24 transfer services to pediatric sexual assault survivors and
25 medical forensic services to sexual assault survivors 13 years
26 old or older, if it finds that the implementation of the

1 proposed plan would provide (i) transfer services or (ii)
2 medical forensic services for sexual assault survivors in
3 accordance with the requirements of this Act and provide
4 sufficient protections from the risk of pregnancy to sexual
5 assault survivors. Notwithstanding anything to the contrary in
6 this paragraph, the Department may approve a sexual assault
7 transfer plan for the provision of medical forensic services
8 if:

9 (1) a treatment hospital with approved pediatric
10 transfer has agreed, as part of an areawide treatment
11 plan, to accept sexual assault survivors 13 years of age
12 or older from the proposed transfer hospital, if the
13 treatment hospital with approved pediatric transfer is
14 geographically closer to the transfer hospital than a
15 treatment hospital or another treatment hospital with
16 approved pediatric transfer and such transfer is not
17 unduly burdensome on the sexual assault survivor; and

18 (2) a treatment hospital has agreed, as a part of an
19 areawide treatment plan, to accept sexual assault
20 survivors under 13 years of age from the proposed transfer
21 hospital and transfer to the treatment hospital would not
22 unduly burden the sexual assault survivor.

23 The Department may not approve a sexual assault transfer
24 plan unless a treatment hospital has agreed, as a part of an
25 areawide treatment plan, to accept sexual assault survivors
26 from the proposed transfer hospital and a transfer to the

1 treatment hospital would not unduly burden the sexual assault
2 survivor.

3 In counties with a population of less than 1,000,000, the
4 Department may not approve a sexual assault transfer plan for
5 a hospital located within a 20-mile radius of a 4-year public
6 university, not including community colleges, unless there is
7 a treatment hospital or out-of-state hospital with a sexual
8 assault treatment plan approved by the Department within a
9 30-mile ~~20-mile~~ radius of the 4-year public university.

10 A transfer must be in accordance with federal and State
11 laws and local ordinances.

12 A treatment hospital with approved pediatric transfer must
13 submit an areawide treatment plan under Section 3 of this Act
14 that includes a written agreement with a treatment hospital
15 stating that the treatment hospital will provide medical
16 forensic services to pediatric sexual assault survivors
17 transferred from the treatment hospital with approved
18 pediatric transfer. The areawide treatment plan may also
19 include an approved pediatric health care facility.

20 A transfer hospital must submit an areawide treatment plan
21 under Section 3 of this Act that includes a written agreement
22 with a treatment hospital stating that the treatment hospital
23 will provide medical forensic services to all sexual assault
24 survivors transferred from the transfer hospital. The areawide
25 treatment plan may also include an approved pediatric health
26 care facility. Notwithstanding anything to the contrary in

1 this paragraph, the areawide treatment plan may include a
2 written agreement with a treatment hospital with approved
3 pediatric transfer that is geographically closer than other
4 hospitals providing medical forensic services to sexual
5 assault survivors 13 years of age or older stating that the
6 treatment hospital with approved pediatric transfer will
7 provide medical services to sexual assault survivors 13 years
8 of age or older who are transferred from the transfer
9 hospital. If the areawide treatment plan includes a written
10 agreement with a treatment hospital with approved pediatric
11 transfer, it must also include a written agreement with a
12 treatment hospital stating that the treatment hospital will
13 provide medical forensic services to sexual assault survivors
14 under 13 years of age who are transferred from the transfer
15 hospital.

16 Beginning January 1, 2019, each treatment hospital and
17 treatment hospital with approved pediatric transfer shall
18 ensure that emergency department attending physicians,
19 physician assistants, advanced practice registered nurses, and
20 registered professional nurses providing clinical services,
21 who do not meet the definition of a qualified medical provider
22 in Section 1a of this Act, receive a minimum of 2 hours of
23 sexual assault training by July 1, 2020 or until the treatment
24 hospital or treatment hospital with approved pediatric
25 transfer certifies to the Department, in a form and manner
26 prescribed by the Department, that it employs or contracts

1 with a qualified medical provider in accordance with
2 subsection (a-7) of Section 5, whichever occurs first.

3 After July 1, 2020 or once a treatment hospital or a
4 treatment hospital with approved pediatric transfer certifies
5 compliance with subsection (a-7) of Section 5, whichever
6 occurs first, each treatment hospital and treatment hospital
7 with approved pediatric transfer shall ensure that emergency
8 department attending physicians, physician assistants,
9 advanced practice registered nurses, and registered
10 professional nurses providing clinical services, who do not
11 meet the definition of a qualified medical provider in Section
12 1a of this Act, receive a minimum of 2 hours of continuing
13 education on responding to sexual assault survivors every 2
14 years. Protocols for training shall be included in the
15 hospital's sexual assault treatment plan.

16 Sexual assault training provided under this subsection may
17 be provided in person or online and shall include, but not be
18 limited to:

19 (1) information provided on the provision of medical
20 forensic services;

21 (2) information on the use of the Illinois Sexual
22 Assault Evidence Collection Kit;

23 (3) information on sexual assault epidemiology,
24 neurobiology of trauma, drug-facilitated sexual assault,
25 child sexual abuse, and Illinois sexual assault-related
26 laws; and

1 (4) information on the hospital's sexual
2 assault-related policies and procedures.

3 The online training made available by the Office of the
4 Attorney General under subsection (b) of Section 10 may be
5 used to comply with this subsection.

6 (b) An approved pediatric health care facility may provide
7 medical forensic services, in accordance with rules adopted by
8 the Department, to all pediatric sexual assault survivors who
9 present for medical forensic services in relation to injuries
10 or trauma resulting from a sexual assault. These services
11 shall be provided by a qualified medical provider.

12 A pediatric health care facility must participate in or
13 submit an areawide treatment plan under Section 3 of this Act
14 that includes a treatment hospital. If a pediatric health care
15 facility does not provide certain medical or surgical services
16 that are provided by hospitals, the areawide sexual assault
17 treatment plan must include a procedure for ensuring a sexual
18 assault survivor in need of such medical or surgical services
19 receives the services at the treatment hospital. The areawide
20 treatment plan may also include a treatment hospital with
21 approved pediatric transfer.

22 The Department shall review a proposed sexual assault
23 treatment plan submitted by a pediatric health care facility
24 within 60 days after receipt of the plan. If the Department
25 finds that the proposed plan meets the minimum requirements
26 set forth in Section 5 of this Act and that implementation of

1 the proposed plan would provide medical forensic services for
2 pediatric sexual assault survivors, then the Department shall
3 approve the plan. If the Department does not approve a plan,
4 then the Department shall notify the pediatric health care
5 facility that the proposed plan has not been approved. The
6 pediatric health care facility shall have 30 days to submit a
7 revised plan. The Department shall review the revised plan
8 within 30 days after receipt of the plan and notify the
9 pediatric health care facility whether the revised plan is
10 approved or rejected. Until the Department has approved a
11 treatment plan, a A pediatric health care facility may not
12 provide medical forensic services to pediatric sexual assault
13 survivors who present with a complaint of sexual assault
14 within a minimum of 96 hours ~~the last 7 days~~ or who have
15 disclosed past sexual assault by a specific individual and
16 were in the care of that individual within a minimum of 96
17 hours ~~the last 7 days until the Department has approved a~~
18 ~~treatment plan.~~

19 If an approved pediatric health care facility is not open
20 24 hours a day, 7 days a week, it shall post signage at each
21 public entrance to its facility that:

- 22 (1) is at least 14 inches by 14 inches in size;
- 23 (2) directs those seeking services as follows: "If
24 closed, call 911 for services or go to the closest
25 hospital emergency department, (insert name) located at
26 (insert address).";

1 (3) lists the approved pediatric health care
2 facility's hours of operation;

3 (4) lists the street address of the building;

4 (5) has a black background with white bold capital
5 lettering in a clear and easy to read font that is at least
6 72-point type, and with "call 911" in at least 125-point
7 type;

8 (6) is posted clearly and conspicuously on or adjacent
9 to the door at each entrance and, if building materials
10 allow, is posted internally for viewing through glass; if
11 posted externally, the sign shall be made of
12 weather-resistant and theft-resistant materials,
13 non-removable, and adhered permanently to the building;
14 and

15 (7) has lighting that is part of the sign itself or is
16 lit with a dedicated light that fully illuminates the
17 sign.

18 A copy of the proposed sign must be submitted to the
19 Department and approved as part of the approved pediatric
20 health care facility's sexual assault treatment plan.

21 (c) Each treatment hospital, treatment hospital with
22 approved pediatric transfer, and approved pediatric health
23 care facility must enter into a memorandum of understanding
24 with a rape crisis center for medical advocacy services, if
25 these services are available to the treatment hospital,
26 treatment hospital with approved pediatric transfer, or

1 approved pediatric health care facility. With the consent of
2 the sexual assault survivor, a rape crisis counselor shall
3 remain in the exam room during the collection for forensic
4 evidence.

5 (d) Every treatment hospital, treatment hospital with
6 approved pediatric transfer, and approved pediatric health
7 care facility's sexual assault treatment plan shall include
8 procedures for complying with mandatory reporting requirements
9 pursuant to (1) the Abused and Neglected Child Reporting Act;
10 (2) the Abused and Neglected Long Term Care Facility Residents
11 Reporting Act; (3) the Adult Protective Services Act; and (iv)
12 the Criminal Identification Act.

13 (e) Each treatment hospital, treatment hospital with
14 approved pediatric transfer, and approved pediatric health
15 care facility shall submit to the Department every 6 months,
16 in a manner prescribed by the Department, the following
17 information:

18 (1) The total number of patients who presented with a
19 complaint of sexual assault.

20 (2) The total number of Illinois Sexual Assault
21 Evidence Collection Kits:

22 (A) offered to (i) all sexual assault survivors
23 and (ii) pediatric sexual assault survivors pursuant
24 to paragraph (1.5) of subsection (a-5) of Section 5;

25 (B) completed for (i) all sexual assault survivors
26 and (ii) pediatric sexual assault survivors; and

1 (C) declined by (i) all sexual assault survivors
2 and (ii) pediatric sexual assault survivors.

3 This information shall be made available on the
4 Department's website.

5 (f) This Section is effective on and after January 1,
6 2024.

7 (Source: P.A. 101-73, eff. 7-12-19; 101-634, eff. 6-5-20;
8 102-22, eff. 6-25-21; 102-674, eff. 11-30-21.)

9 (410 ILCS 70/2-1)

10 (Section scheduled to be repealed on December 31, 2023)

11 Sec. 2-1. Hospital, approved pediatric health care
12 facility, and approved federally qualified health center
13 requirements for sexual assault plans.

14 (a) Every hospital required to be licensed by the
15 Department pursuant to the Hospital Licensing Act, or operated
16 under the University of Illinois Hospital Act that provides
17 general medical and surgical hospital services shall provide
18 either (i) transfer services to all sexual assault survivors,
19 (ii) medical forensic services to all sexual assault
20 survivors, or (iii) transfer services to pediatric sexual
21 assault survivors and medical forensic services to sexual
22 assault survivors 13 years old or older, in accordance with
23 rules adopted by the Department.

24 In addition, every such hospital, regardless of whether or
25 not a request is made for reimbursement, shall submit to the

1 Department a plan to provide either (i) transfer services to
2 all sexual assault survivors, (ii) medical forensic services
3 to all sexual assault survivors, or (iii) transfer services to
4 pediatric sexual assault survivors and medical forensic
5 services to sexual assault survivors 13 years old or older.
6 The Department shall approve such plan for either (i) transfer
7 services to all sexual assault survivors, (ii) medical
8 forensic services to all sexual assault survivors, or (iii)
9 transfer services to pediatric sexual assault survivors and
10 medical forensic services to sexual assault survivors 13 years
11 old or older, if it finds that the implementation of the
12 proposed plan would provide (i) transfer services or (ii)
13 medical forensic services for sexual assault survivors in
14 accordance with the requirements of this Act and provide
15 sufficient protections from the risk of pregnancy to sexual
16 assault survivors. Notwithstanding anything to the contrary in
17 this paragraph, the Department may approve a sexual assault
18 transfer plan for the provision of medical forensic services
19 if:

20 (1) a treatment hospital with approved pediatric
21 transfer has agreed, as part of an areawide treatment
22 plan, to accept sexual assault survivors 13 years of age
23 or older from the proposed transfer hospital, if the
24 treatment hospital with approved pediatric transfer is
25 geographically closer to the transfer hospital than a
26 treatment hospital or another treatment hospital with

1 approved pediatric transfer and such transfer is not
2 unduly burdensome on the sexual assault survivor; and

3 (2) a treatment hospital has agreed, as a part of an
4 areawide treatment plan, to accept sexual assault
5 survivors under 13 years of age from the proposed transfer
6 hospital and transfer to the treatment hospital would not
7 unduly burden the sexual assault survivor.

8 The Department may not approve a sexual assault transfer
9 plan unless a treatment hospital has agreed, as a part of an
10 areawide treatment plan, to accept sexual assault survivors
11 from the proposed transfer hospital and a transfer to the
12 treatment hospital would not unduly burden the sexual assault
13 survivor.

14 In counties with a population of less than 1,000,000, the
15 Department may not approve a sexual assault transfer plan for
16 a hospital located within a 20-mile radius of a 4-year public
17 university, not including community colleges, unless there is
18 a treatment hospital or out-of-state hospital with a sexual
19 assault treatment plan approved by the Department within a
20 30-mile ~~20-mile~~ radius of the 4-year public university.

21 A transfer must be in accordance with federal and State
22 laws and local ordinances.

23 A treatment hospital with approved pediatric transfer must
24 submit an areawide treatment plan under Section 3-1 of this
25 Act that includes a written agreement with a treatment
26 hospital stating that the treatment hospital will provide

1 medical forensic services to pediatric sexual assault
2 survivors transferred from the treatment hospital with
3 approved pediatric transfer. The areawide treatment plan may
4 also include an approved pediatric health care facility.

5 A transfer hospital must submit an areawide treatment plan
6 under Section 3-1 of this Act that includes a written
7 agreement with a treatment hospital stating that the treatment
8 hospital will provide medical forensic services to all sexual
9 assault survivors transferred from the transfer hospital. The
10 areawide treatment plan may also include an approved pediatric
11 health care facility. Notwithstanding anything to the contrary
12 in this paragraph, the areawide treatment plan may include a
13 written agreement with a treatment hospital with approved
14 pediatric transfer that is geographically closer than other
15 hospitals providing medical forensic services to sexual
16 assault survivors 13 years of age or older stating that the
17 treatment hospital with approved pediatric transfer will
18 provide medical services to sexual assault survivors 13 years
19 of age or older who are transferred from the transfer
20 hospital. If the areawide treatment plan includes a written
21 agreement with a treatment hospital with approved pediatric
22 transfer, it must also include a written agreement with a
23 treatment hospital stating that the treatment hospital will
24 provide medical forensic services to sexual assault survivors
25 under 13 years of age who are transferred from the transfer
26 hospital.

1 Beginning January 1, 2019, each treatment hospital and
2 treatment hospital with approved pediatric transfer shall
3 ensure that emergency department attending physicians,
4 physician assistants, advanced practice registered nurses, and
5 registered professional nurses providing clinical services,
6 who do not meet the definition of a qualified medical provider
7 in Section 1a-1 of this Act, receive a minimum of 2 hours of
8 sexual assault training by July 1, 2020 or until the treatment
9 hospital or treatment hospital with approved pediatric
10 transfer certifies to the Department, in a form and manner
11 prescribed by the Department, that it employs or contracts
12 with a qualified medical provider in accordance with
13 subsection (a-7) of Section 5-1, whichever occurs first.

14 After July 1, 2020 or once a treatment hospital or a
15 treatment hospital with approved pediatric transfer certifies
16 compliance with subsection (a-7) of Section 5-1, whichever
17 occurs first, each treatment hospital and treatment hospital
18 with approved pediatric transfer shall ensure that emergency
19 department attending physicians, physician assistants,
20 advanced practice registered nurses, and registered
21 professional nurses providing clinical services, who do not
22 meet the definition of a qualified medical provider in Section
23 1a-1 of this Act, receive a minimum of 2 hours of continuing
24 education on responding to sexual assault survivors every 2
25 years. Protocols for training shall be included in the
26 hospital's sexual assault treatment plan.

1 Sexual assault training provided under this subsection may
2 be provided in person or online and shall include, but not be
3 limited to:

4 (1) information provided on the provision of medical
5 forensic services;

6 (2) information on the use of the Illinois Sexual
7 Assault Evidence Collection Kit;

8 (3) information on sexual assault epidemiology,
9 neurobiology of trauma, drug-facilitated sexual assault,
10 child sexual abuse, and Illinois sexual assault-related
11 laws; and

12 (4) information on the hospital's sexual
13 assault-related policies and procedures.

14 The online training made available by the Office of the
15 Attorney General under subsection (b) of Section 10-1 may be
16 used to comply with this subsection.

17 (b) An approved pediatric health care facility may provide
18 medical forensic services, in accordance with rules adopted by
19 the Department, to all pediatric sexual assault survivors who
20 present for medical forensic services in relation to injuries
21 or trauma resulting from a sexual assault. These services
22 shall be provided by a qualified medical provider.

23 A pediatric health care facility must participate in or
24 submit an areawide treatment plan under Section 3-1 of this
25 Act that includes a treatment hospital. If a pediatric health
26 care facility does not provide certain medical or surgical

1 services that are provided by hospitals, the areawide sexual
2 assault treatment plan must include a procedure for ensuring a
3 sexual assault survivor in need of such medical or surgical
4 services receives the services at the treatment hospital. The
5 areawide treatment plan may also include a treatment hospital
6 with approved pediatric transfer.

7 The Department shall review a proposed sexual assault
8 treatment plan submitted by a pediatric health care facility
9 within 60 days after receipt of the plan. If the Department
10 finds that the proposed plan meets the minimum requirements
11 set forth in Section 5-1 of this Act and that implementation of
12 the proposed plan would provide medical forensic services for
13 pediatric sexual assault survivors, then the Department shall
14 approve the plan. If the Department does not approve a plan,
15 then the Department shall notify the pediatric health care
16 facility that the proposed plan has not been approved. The
17 pediatric health care facility shall have 30 days to submit a
18 revised plan. The Department shall review the revised plan
19 within 30 days after receipt of the plan and notify the
20 pediatric health care facility whether the revised plan is
21 approved or rejected. Until the Department has approved a
22 treatment plan, a ~~A~~ pediatric health care facility may not
23 provide medical forensic services to pediatric sexual assault
24 survivors who present with a complaint of sexual assault
25 within a minimum of 96 hours ~~the last 7 days~~ or who have
26 disclosed past sexual assault by a specific individual and

1 were in the care of that individual within a minimum of 96
2 hours ~~the last 7 days until the Department has approved a~~
3 ~~treatment plan.~~

4 If an approved pediatric health care facility is not open
5 24 hours a day, 7 days a week, it shall post signage at each
6 public entrance to its facility that:

7 (1) is at least 14 inches by 14 inches in size;

8 (2) directs those seeking services as follows: "If
9 closed, call 911 for services or go to the closest
10 hospital emergency department, (insert name) located at
11 (insert address).";

12 (3) lists the approved pediatric health care
13 facility's hours of operation;

14 (4) lists the street address of the building;

15 (5) has a black background with white bold capital
16 lettering in a clear and easy to read font that is at least
17 72-point type, and with "call 911" in at least 125-point
18 type;

19 (6) is posted clearly and conspicuously on or adjacent
20 to the door at each entrance and, if building materials
21 allow, is posted internally for viewing through glass; if
22 posted externally, the sign shall be made of
23 weather-resistant and theft-resistant materials,
24 non-removable, and adhered permanently to the building;
25 and

26 (7) has lighting that is part of the sign itself or is

1 lit with a dedicated light that fully illuminates the
2 sign.

3 (b-5) An approved federally qualified health center may
4 provide medical forensic services, in accordance with rules
5 adopted by the Department, to all sexual assault survivors 13
6 years old or older who present for medical forensic services
7 in relation to injuries or trauma resulting from a sexual
8 assault during the duration, and 90 days thereafter, of a
9 proclamation issued by the Governor declaring a disaster, or a
10 successive proclamation regarding the same disaster, in all
11 102 counties due to a public health emergency. These services
12 shall be provided by (i) a qualified medical provider,
13 physician, physician assistant, or advanced practice
14 registered nurse who has received a minimum of 10 hours of
15 sexual assault training provided by a qualified medical
16 provider on current Illinois legislation, how to properly
17 perform a medical forensic examination, evidence collection,
18 drug and alcohol facilitated sexual assault, and forensic
19 photography and has all documentation and photos peer reviewed
20 by a qualified medical provider or (ii) until the federally
21 qualified health care center certifies to the Department, in a
22 form and manner prescribed by the Department, that it employs
23 or contracts with a qualified medical provider in accordance
24 with subsection (a-7) of Section 5-1, whichever occurs first.

25 A federally qualified health center must participate in or
26 submit an areawide treatment plan under Section 3-1 of this

1 Act that includes a treatment hospital. If a federally
2 qualified health center does not provide certain medical or
3 surgical services that are provided by hospitals, the areawide
4 sexual assault treatment plan must include a procedure for
5 ensuring a sexual assault survivor in need of such medical or
6 surgical services receives the services at the treatment
7 hospital. The areawide treatment plan may also include a
8 treatment hospital with approved pediatric transfer or an
9 approved pediatric health care facility.

10 The Department shall review a proposed sexual assault
11 treatment plan submitted by a federally qualified health
12 center within 14 days after receipt of the plan. If the
13 Department finds that the proposed plan meets the minimum
14 requirements set forth in Section 5-1 and that implementation
15 of the proposed plan would provide medical forensic services
16 for sexual assault survivors 13 years old or older, then the
17 Department shall approve the plan. If the Department does not
18 approve a plan, then the Department shall notify the federally
19 qualified health center that the proposed plan has not been
20 approved. The federally qualified health center shall have 14
21 days to submit a revised plan. The Department shall review the
22 revised plan within 14 days after receipt of the plan and
23 notify the federally qualified health center whether the
24 revised plan is approved or rejected. Until the Department has
25 approved a treatment plan, a ~~A~~ federally qualified health
26 center may not ~~(i)~~ provide medical forensic services to: (A)

1 sexual assault survivors 13 years old or older who present
2 with a complaint of sexual assault within a minimum of the
3 previous 7 days or ~~(ii)~~ who have disclosed past sexual assault
4 by a specific individual and were in the care of that
5 individual within a minimum of the previous 7 days; and (B)
6 pediatric sexual assault survivors who present with a
7 complaint of sexual assault within a minimum of 96 hours or who
8 have disclosed past sexual assault by a specific individual
9 and were in the care of that individual within a minimum of 96
10 hours until the Department has approved a treatment plan.

11 If an approved federally qualified health center is not
12 open 24 hours a day, 7 days a week, it shall post signage at
13 each public entrance to its facility that:

14 (1) is at least 14 inches by 14 inches in size;

15 (2) directs those seeking services as follows: "If
16 closed, call 911 for services or go to the closest
17 hospital emergency department, (insert name) located at
18 (insert address).";

19 (3) lists the approved federally qualified health
20 center's hours of operation;

21 (4) lists the street address of the building;

22 (5) has a black background with white bold capital
23 lettering in a clear and easy to read font that is at least
24 72-point type, and with "call 911" in at least 125-point
25 type;

26 (6) is posted clearly and conspicuously on or adjacent

1 to the door at each entrance and, if building materials
2 allow, is posted internally for viewing through glass; if
3 posted externally, the sign shall be made of
4 weather-resistant and theft-resistant materials,
5 non-removable, and adhered permanently to the building;
6 and

7 (7) has lighting that is part of the sign itself or is
8 lit with a dedicated light that fully illuminates the
9 sign.

10 A copy of the proposed sign must be submitted to the
11 Department and approved as part of the approved federally
12 qualified health center's sexual assault treatment plan.

13 (c) Each treatment hospital, treatment hospital with
14 approved pediatric transfer, approved pediatric health care
15 facility, and approved federally qualified health center must
16 enter into a memorandum of understanding with a rape crisis
17 center for medical advocacy services, if these services are
18 available to the treatment hospital, treatment hospital with
19 approved pediatric transfer, approved pediatric health care
20 facility, or approved federally qualified health center. With
21 the consent of the sexual assault survivor, a rape crisis
22 counselor shall remain in the exam room during the collection
23 for forensic evidence.

24 (d) Every treatment hospital, treatment hospital with
25 approved pediatric transfer, approved pediatric health care
26 facility, and approved federally qualified health center's

1 sexual assault treatment plan shall include procedures for
2 complying with mandatory reporting requirements pursuant to
3 (1) the Abused and Neglected Child Reporting Act; (2) the
4 Abused and Neglected Long Term Care Facility Residents
5 Reporting Act; (3) the Adult Protective Services Act; and (iv)
6 the Criminal Identification Act.

7 (e) Each treatment hospital, treatment hospital with
8 approved pediatric transfer, approved pediatric health care
9 facility, and approved federally qualified health center shall
10 submit to the Department every 6 months, in a manner
11 prescribed by the Department, the following information:

12 (1) The total number of patients who presented with a
13 complaint of sexual assault.

14 (2) The total number of Illinois Sexual Assault
15 Evidence Collection Kits:

16 (A) offered to (i) all sexual assault survivors
17 and (ii) pediatric sexual assault survivors pursuant
18 to paragraph (1.5) of subsection (a-5) of Section 5-1;

19 (B) completed for (i) all sexual assault survivors
20 and (ii) pediatric sexual assault survivors; and

21 (C) declined by (i) all sexual assault survivors
22 and (ii) pediatric sexual assault survivors.

23 This information shall be made available on the
24 Department's website.

25 (f) This Section is repealed on December 31, 2023.

26 (Source: P.A. 101-634, eff. 6-5-20; 102-22, eff. 6-25-21;

1 102-674, eff. 11-30-21.)

2 (410 ILCS 70/2.1) (from Ch. 111 1/2, par. 87-2.1)

3 Sec. 2.1. Plan of correction; penalties.

4 (a) If the Department surveyor determines that the
5 hospital or approved pediatric health care facility is not in
6 compliance with its approved plan, the surveyor shall provide
7 the hospital or approved pediatric health care facility with a
8 written list of the specific items of noncompliance within 10
9 working days after the conclusion of the on-site review. The
10 hospital shall have 10 working days to submit to the
11 Department a plan of correction which contains the hospital's
12 or approved pediatric health care facility's specific
13 proposals for correcting the items of noncompliance. The
14 Department shall review the plan of correction and notify the
15 hospital in writing within 10 working days as to whether the
16 plan is acceptable or unacceptable.

17 If the Department finds the Plan of Correction
18 unacceptable, the hospital or approved pediatric health care
19 facility shall have 10 working days to resubmit an acceptable
20 Plan of Correction. Upon notification that its Plan of
21 Correction is acceptable, a hospital or approved pediatric
22 health care facility shall implement the Plan of Correction
23 within 60 days.

24 (b) The failure of a hospital to submit an acceptable Plan
25 of Correction or to implement the Plan of Correction, within

1 the time frames required in this Section, will subject a
2 hospital to the imposition of a fine by the Department. The
3 Department may impose a fine of up to \$500 per day until a
4 hospital complies with the requirements of this Section. No
5 enforcement action or fine shall be taken or assessed until
6 (i) 12 months after the effective date of this amendatory Act
7 of the 102nd General Assembly or (ii) after the end of a public
8 health emergency declared by a State or federal governmental
9 entity, whichever is later.

10 If an approved pediatric health care facility fails to
11 submit an acceptable Plan of Correction or to implement the
12 Plan of Correction within the time frames required in this
13 Section, then the Department shall notify the approved
14 pediatric health care facility that the approved pediatric
15 health care facility may not provide medical forensic services
16 under this Act. The Department may impose a fine of up to \$500
17 per patient provided services in violation of this Act.

18 (c) Before imposing a fine pursuant to this Section, the
19 Department shall provide the hospital or approved pediatric
20 health care facility via certified mail with written notice
21 and an opportunity for an administrative hearing. Such hearing
22 must be requested within 10 working days after receipt of the
23 Department's Notice. All hearings shall be conducted in
24 accordance with the Department's rules in administrative
25 hearings.

26 (d) This Section is effective on and after January 1,

1 2024.

2 (Source: P.A. 101-81, eff. 7-12-19; 101-634, eff. 6-5-20;
3 102-22, eff. 6-25-21; 102-674, eff. 11-30-21.)

4 (410 ILCS 70/2.1-1)

5 (Section scheduled to be repealed on December 31, 2023)

6 Sec. 2.1-1. Plan of correction; penalties.

7 (a) If the Department surveyor determines that the
8 hospital, approved pediatric health care facility, or approved
9 federally qualified health center is not in compliance with
10 its approved plan, the surveyor shall provide the hospital,
11 approved pediatric health care facility, or approved federally
12 qualified health center with a written list of the specific
13 items of noncompliance within 10 working days after the
14 conclusion of the on-site review. The hospital, approved
15 pediatric health care facility, or approved federally
16 qualified health center shall have 10 working days to submit
17 to the Department a plan of correction which contains the
18 hospital's, approved pediatric health care facility's, or
19 approved federally qualified health center's specific
20 proposals for correcting the items of noncompliance. The
21 Department shall review the plan of correction and notify the
22 hospital, approved pediatric health care facility, or approved
23 federally qualified health center in writing within 10 working
24 days as to whether the plan is acceptable or unacceptable.

25 If the Department finds the Plan of Correction

1 unacceptable, the hospital, approved pediatric health care
2 facility, or approved federally qualified health center shall
3 have 10 working days to resubmit an acceptable Plan of
4 Correction. Upon notification that its Plan of Correction is
5 acceptable, a hospital, approved pediatric health care
6 facility, or approved federally qualified health center shall
7 implement the Plan of Correction within 60 days.

8 (b) The failure of a hospital to submit an acceptable Plan
9 of Correction or to implement the Plan of Correction, within
10 the time frames required in this Section, will subject a
11 hospital to the imposition of a fine by the Department. The
12 Department may impose a fine of up to \$500 per day until a
13 hospital complies with the requirements of this Section. No
14 enforcement action or fine shall be taken or assessed until
15 (i) 12 months after the effective date of this amendatory Act
16 of the 102nd General Assembly or (ii) after the end of a public
17 health emergency declared by a State or federal governmental
18 entity, whichever is later.

19 If an approved pediatric health care facility or approved
20 federally qualified health center fails to submit an
21 acceptable Plan of Correction or to implement the Plan of
22 Correction within the time frames required in this Section,
23 then the Department shall notify the approved pediatric health
24 care facility or approved federally qualified health center
25 that the approved pediatric health care facility or approved
26 federally qualified health center may not provide medical

1 forensic services under this Act. The Department may impose a
2 fine of up to \$500 per patient provided services in violation
3 of this Act.

4 (c) Before imposing a fine pursuant to this Section, the
5 Department shall provide the hospital, or approved pediatric
6 health care facility, or approved federally qualified health
7 center via certified mail with written notice and an
8 opportunity for an administrative hearing. Such hearing must
9 be requested within 10 working days after receipt of the
10 Department's Notice. All hearings shall be conducted in
11 accordance with the Department's rules in administrative
12 hearings.

13 (d) This Section is repealed on December 31, 2023.

14 (Source: P.A. 101-634, eff. 6-5-20; 102-22, eff. 6-25-21;
15 102-674, eff. 11-30-21.)

16 (410 ILCS 70/5) (from Ch. 111 1/2, par. 87-5)

17 Sec. 5. Minimum requirements for medical forensic services
18 provided to sexual assault survivors by hospitals and approved
19 pediatric health care facilities.

20 (a) Every hospital and approved pediatric health care
21 facility providing medical forensic services to sexual assault
22 survivors under this Act shall, as minimum requirements for
23 such services, provide, with the consent of the sexual assault
24 survivor, and as ordered by the attending physician, an
25 advanced practice registered nurse, or a physician assistant,

1 the services set forth in subsection (a-5).

2 Beginning January 1, 2024 ~~2023~~, a qualified medical
3 provider must provide the services set forth in subsection
4 (a-5).

5 (a-5) A treatment hospital, a treatment hospital with
6 approved pediatric transfer, or an approved pediatric health
7 care facility shall provide the following services in
8 accordance with subsection (a):

9 (1) Appropriate medical forensic services without
10 delay, in a private, age-appropriate or
11 developmentally-appropriate space, required to ensure the
12 health, safety, and welfare of a sexual assault survivor
13 and which may be used as evidence in a criminal proceeding
14 against a person accused of the sexual assault, in a
15 proceeding under the Juvenile Court Act of 1987, or in an
16 investigation under the Abused and Neglected Child
17 Reporting Act.

18 Records of medical forensic services, including
19 results of examinations and tests, the Illinois State
20 Police Medical Forensic Documentation Forms, the Illinois
21 State Police Patient Discharge Materials, and the Illinois
22 State Police Patient Consent: Collect and Test Evidence or
23 Collect and Hold Evidence Form, shall be maintained by the
24 hospital or approved pediatric health care facility as
25 part of the patient's electronic medical record.

26 Records of medical forensic services of sexual assault

1 survivors under the age of 18 shall be retained by the
2 hospital for a period of 60 years after the sexual assault
3 survivor reaches the age of 18. Records of medical
4 forensic services of sexual assault survivors 18 years of
5 age or older shall be retained by the hospital for a period
6 of 20 years after the date the record was created.

7 Records of medical forensic services may only be
8 disseminated in accordance with Section 6.5 of this Act
9 and other State and federal law.

10 (1.5) An offer to complete the Illinois Sexual Assault
11 Evidence Collection Kit for: (A) any sexual assault
12 survivor 13 years of age or older who presents within a
13 minimum of the last 7 days of the assault or who has
14 disclosed past sexual assault by a specific individual and
15 was in the care of that individual within a minimum of the
16 last 7 days; and (B) any pediatric sexual assault survivor
17 who presents with a complaint of sexual assault within a
18 minimum of 96 hours or who has disclosed past sexual
19 assault by a specific individual and was in the care of
20 that individual within a minimum of 96 hours.

21 (A) Appropriate oral and written information
22 concerning evidence-based guidelines for the
23 appropriateness of evidence collection depending on
24 the sexual development of the sexual assault survivor,
25 the type of sexual assault, and the timing of the
26 sexual assault shall be provided to the sexual assault

1 survivor. ~~Evidence collection is encouraged for~~
2 ~~prepubescent sexual assault survivors who present to a~~
3 ~~hospital or approved pediatric health care facility~~
4 ~~with a complaint of sexual assault within a minimum of~~
5 ~~96 hours after the sexual assault.~~

6 Before January 1, 2024 ~~2023~~, the information
7 required under this subparagraph shall be provided in
8 person by the health care professional providing
9 medical forensic services directly to the sexual
10 assault survivor.

11 On and after January 1, 2024 ~~2023~~, the information
12 required under this subparagraph shall be provided in
13 person by the qualified medical provider providing
14 medical forensic services directly to the sexual
15 assault survivor.

16 The written information provided shall be the
17 information created in accordance with Section 10 of
18 this Act.

19 (B) Following the discussion regarding the
20 evidence-based guidelines for evidence collection in
21 accordance with subparagraph (A), evidence collection
22 must be completed at the sexual assault survivor's
23 request. A sexual assault nurse examiner conducting an
24 examination using the Illinois State Police Sexual
25 Assault Evidence Collection Kit may do so without the
26 presence or participation of a physician.

1 (2) Appropriate oral and written information
2 concerning the possibility of infection, sexually
3 transmitted infection, including an evaluation of the
4 sexual assault survivor's risk of contracting human
5 immunodeficiency virus (HIV) from sexual assault, and
6 pregnancy resulting from sexual assault.

7 (3) Appropriate oral and written information
8 concerning accepted medical procedures, laboratory tests,
9 medication, and possible contraindications of such
10 medication available for the prevention or treatment of
11 infection or disease resulting from sexual assault.

12 (3.5) After a medical evidentiary or physical
13 examination, access to a shower at no cost, unless
14 showering facilities are unavailable.

15 (4) An amount of medication, including HIV
16 prophylaxis, for treatment at the hospital or approved
17 pediatric health care facility and after discharge as is
18 deemed appropriate by the attending physician, an advanced
19 practice registered nurse, or a physician assistant in
20 accordance with the Centers for Disease Control and
21 Prevention guidelines and consistent with the hospital's
22 or approved pediatric health care facility's current
23 approved protocol for sexual assault survivors.

24 (5) Photo documentation of the sexual assault
25 survivor's injuries, anatomy involved in the assault, or
26 other visible evidence on the sexual assault survivor's

1 body to supplement the medical forensic history and
2 written documentation of physical findings and evidence
3 beginning July 1, 2019. Photo documentation does not
4 replace written documentation of the injury.

5 (6) Written and oral instructions indicating the need
6 for follow-up examinations and laboratory tests after the
7 sexual assault to determine the presence or absence of
8 sexually transmitted infection.

9 (7) Referral by hospital or approved pediatric health
10 care facility personnel for appropriate counseling.

11 (8) Medical advocacy services provided by a rape
12 crisis counselor whose communications are protected under
13 Section 8-802.1 of the Code of Civil Procedure, if there
14 is a memorandum of understanding between the hospital or
15 approved pediatric health care facility and a rape crisis
16 center. With the consent of the sexual assault survivor, a
17 rape crisis counselor shall remain in the exam room during
18 the medical forensic examination.

19 (9) Written information regarding services provided by
20 a Children's Advocacy Center and rape crisis center, if
21 applicable.

22 (10) A treatment hospital, a treatment hospital with
23 approved pediatric transfer, an out-of-state hospital as
24 defined in Section 5.4, or an approved pediatric health
25 care facility shall comply with the rules relating to the
26 collection and tracking of sexual assault evidence adopted

1 by the Illinois State Police under Section 50 of the
2 Sexual Assault Evidence Submission Act.

3 (11) Written information regarding the Illinois State
4 Police sexual assault evidence tracking system.

5 (a-7) By January 1, 2024 ~~2023~~, every hospital with a
6 treatment plan approved by the Department shall employ or
7 contract with a qualified medical provider to initiate medical
8 forensic services to a sexual assault survivor within 90
9 minutes of the patient presenting to the treatment hospital or
10 treatment hospital with approved pediatric transfer. The
11 provision of medical forensic services by a qualified medical
12 provider shall not delay the provision of life-saving medical
13 care.

14 (b) Any person who is a sexual assault survivor who seeks
15 medical forensic services or follow-up healthcare under this
16 Act shall be provided such services without the consent of any
17 parent, guardian, custodian, surrogate, or agent. If a sexual
18 assault survivor is unable to consent to medical forensic
19 services, the services may be provided under the Consent by
20 Minors to Health Care Services ~~Medical Procedures~~ Act, the
21 Health Care Surrogate Act, or other applicable State and
22 federal laws.

23 (b-5) Every hospital or approved pediatric health care
24 facility providing medical forensic services to sexual assault
25 survivors shall issue a voucher to any sexual assault survivor
26 who is eligible to receive one in accordance with Section 5.2

1 of this Act. The hospital shall make a copy of the voucher and
2 place it in the medical record of the sexual assault survivor.
3 The hospital shall provide a copy of the voucher to the sexual
4 assault survivor after discharge upon request.

5 (c) Nothing in this Section creates a physician-patient
6 relationship that extends beyond discharge from the hospital
7 or approved pediatric health care facility.

8 (d) This Section is effective on and after January 1, 2024
9 ~~2022~~.

10 (Source: P.A. 101-81, eff. 7-12-19; 101-377, eff. 8-16-19;
11 101-634, eff. 6-5-20; 102-22, eff. 6-25-21; 102-538, eff.
12 8-20-21; 102-674, eff. 11-30-21; revised 12-16-21.)

13 (410 ILCS 70/5-1)

14 (Section scheduled to be repealed on December 31, 2023)

15 Sec. 5-1. Minimum requirements for medical forensic
16 services provided to sexual assault survivors by hospitals,
17 approved pediatric health care facilities, and approved
18 federally qualified health centers.

19 (a) Every hospital, approved pediatric health care
20 facility, and approved federally qualified health center
21 providing medical forensic services to sexual assault
22 survivors under this Act shall, as minimum requirements for
23 such services, provide, with the consent of the sexual assault
24 survivor, and as ordered by the attending physician, an
25 advanced practice registered nurse, or a physician assistant,

1 the services set forth in subsection (a-5).

2 Beginning January 1, 2023, a qualified medical provider
3 must provide the services set forth in subsection (a-5).

4 (a-5) A treatment hospital, a treatment hospital with
5 approved pediatric transfer, or an approved pediatric health
6 care facility, or an approved federally qualified health
7 center shall provide the following services in accordance with
8 subsection (a):

9 (1) Appropriate medical forensic services without
10 delay, in a private, age-appropriate or
11 developmentally-appropriate space, required to ensure the
12 health, safety, and welfare of a sexual assault survivor
13 and which may be used as evidence in a criminal proceeding
14 against a person accused of the sexual assault, in a
15 proceeding under the Juvenile Court Act of 1987, or in an
16 investigation under the Abused and Neglected Child
17 Reporting Act.

18 Records of medical forensic services, including
19 results of examinations and tests, the Illinois State
20 Police Medical Forensic Documentation Forms, the Illinois
21 State Police Patient Discharge Materials, and the Illinois
22 State Police Patient Consent: Collect and Test Evidence or
23 Collect and Hold Evidence Form, shall be maintained by the
24 hospital or approved pediatric health care facility as
25 part of the patient's electronic medical record.

26 Records of medical forensic services of sexual assault

1 survivors under the age of 18 shall be retained by the
2 hospital for a period of 60 years after the sexual assault
3 survivor reaches the age of 18. Records of medical
4 forensic services of sexual assault survivors 18 years of
5 age or older shall be retained by the hospital for a period
6 of 20 years after the date the record was created.

7 Records of medical forensic services may only be
8 disseminated in accordance with Section 6.5-1 of this Act
9 and other State and federal law.

10 (1.5) An offer to complete the Illinois Sexual Assault
11 Evidence Collection Kit for: (A) any sexual assault
12 survivor 13 years of age or older who presents within a
13 minimum of the last 7 days of the assault or who has
14 disclosed past sexual assault by a specific individual and
15 was in the care of that individual within a minimum of the
16 last 7 days; and (B) any pediatric sexual assault survivor
17 who presents with a complaint of sexual assault within a
18 minimum of 96 hours or who has disclosed past sexual
19 assault by a specific individual and was in the care of
20 that individual within a minimum of 96 hours.

21 (A) Appropriate oral and written information
22 concerning evidence-based guidelines for the
23 appropriateness of evidence collection depending on
24 the sexual development of the sexual assault survivor,
25 the type of sexual assault, and the timing of the
26 sexual assault shall be provided to the sexual assault

1 survivor. ~~Evidence collection is encouraged for~~
2 ~~prepubescent sexual assault survivors who present to a~~
3 ~~hospital or approved pediatric health care facility~~
4 ~~with a complaint of sexual assault within a minimum of~~
5 ~~96 hours after the sexual assault.~~

6 Before January 1, 2023, the information required
7 under this subparagraph shall be provided in person by
8 the health care professional providing medical
9 forensic services directly to the sexual assault
10 survivor.

11 On and after January 1, 2023, the information
12 required under this subparagraph shall be provided in
13 person by the qualified medical provider providing
14 medical forensic services directly to the sexual
15 assault survivor.

16 The written information provided shall be the
17 information created in accordance with Section 10-1 of
18 this Act.

19 (B) Following the discussion regarding the
20 evidence-based guidelines for evidence collection in
21 accordance with subparagraph (A), evidence collection
22 must be completed at the sexual assault survivor's
23 request. A sexual assault nurse examiner conducting an
24 examination using the Illinois State Police Sexual
25 Assault Evidence Collection Kit may do so without the
26 presence or participation of a physician.

1 (2) Appropriate oral and written information
2 concerning the possibility of infection, sexually
3 transmitted infection, including an evaluation of the
4 sexual assault survivor's risk of contracting human
5 immunodeficiency virus (HIV) from sexual assault, and
6 pregnancy resulting from sexual assault.

7 (3) Appropriate oral and written information
8 concerning accepted medical procedures, laboratory tests,
9 medication, and possible contraindications of such
10 medication available for the prevention or treatment of
11 infection or disease resulting from sexual assault.

12 (3.5) After a medical evidentiary or physical
13 examination, access to a shower at no cost, unless
14 showering facilities are unavailable.

15 (4) An amount of medication, including HIV
16 prophylaxis, for treatment at the hospital or approved
17 pediatric health care facility and after discharge as is
18 deemed appropriate by the attending physician, an advanced
19 practice registered nurse, or a physician assistant in
20 accordance with the Centers for Disease Control and
21 Prevention guidelines and consistent with the hospital's
22 or approved pediatric health care facility's current
23 approved protocol for sexual assault survivors.

24 (5) Photo documentation of the sexual assault
25 survivor's injuries, anatomy involved in the assault, or
26 other visible evidence on the sexual assault survivor's

1 body to supplement the medical forensic history and
2 written documentation of physical findings and evidence
3 beginning July 1, 2019. Photo documentation does not
4 replace written documentation of the injury.

5 (6) Written and oral instructions indicating the need
6 for follow-up examinations and laboratory tests after the
7 sexual assault to determine the presence or absence of
8 sexually transmitted infection.

9 (7) Referral by hospital or approved pediatric health
10 care facility personnel for appropriate counseling.

11 (8) Medical advocacy services provided by a rape
12 crisis counselor whose communications are protected under
13 Section 8-802.1 of the Code of Civil Procedure, if there
14 is a memorandum of understanding between the hospital or
15 approved pediatric health care facility and a rape crisis
16 center. With the consent of the sexual assault survivor, a
17 rape crisis counselor shall remain in the exam room during
18 the medical forensic examination.

19 (9) Written information regarding services provided by
20 a Children's Advocacy Center and rape crisis center, if
21 applicable.

22 (10) A treatment hospital, a treatment hospital with
23 approved pediatric transfer, an out-of-state hospital as
24 defined in Section 5.4, or an approved pediatric health
25 care facility shall comply with the rules relating to the
26 collection and tracking of sexual assault evidence adopted

1 by the Department of State Police under Section 50 of the
2 Sexual Assault Evidence Submission Act.

3 (11) Written information regarding the Illinois State
4 Police sexual assault evidence tracking system.

5 (a-7) By January 1, 2023, every hospital with a treatment
6 plan approved by the Department shall employ or contract with
7 a qualified medical provider to initiate medical forensic
8 services to a sexual assault survivor within 90 minutes of the
9 patient presenting to the treatment hospital or treatment
10 hospital with approved pediatric transfer. The provision of
11 medical forensic services by a qualified medical provider
12 shall not delay the provision of life-saving medical care.

13 (b) Any person who is a sexual assault survivor who seeks
14 medical forensic services or follow-up healthcare under this
15 Act shall be provided such services without the consent of any
16 parent, guardian, custodian, surrogate, or agent. If a sexual
17 assault survivor is unable to consent to medical forensic
18 services, the services may be provided under the Consent by
19 Minors to Medical Procedures Act, the Health Care Surrogate
20 Act, or other applicable State and federal laws.

21 (b-5) Every hospital, approved pediatric health care
22 facility, or approved federally qualified health center
23 providing medical forensic services to sexual assault
24 survivors shall issue a voucher to any sexual assault survivor
25 who is eligible to receive one in accordance with Section
26 5.2-1 of this Act. The hospital, approved pediatric health

1 care facility, or approved federally qualified health center
2 shall make a copy of the voucher and place it in the medical
3 record of the sexual assault survivor. The hospital, approved
4 pediatric health care facility, or approved federally
5 qualified health center shall provide a copy of the voucher to
6 the sexual assault survivor after discharge upon request.

7 (c) Nothing in this Section creates a physician-patient
8 relationship that extends beyond discharge from the hospital,
9 or approved pediatric health care facility, or approved
10 federally qualified health center.

11 (d) This Section is repealed on December 31, 2023.

12 (Source: P.A. 101-634, eff. 6-5-20; 102-22, eff. 6-25-21;
13 102-674, eff. 11-30-21.)

14 (410 ILCS 70/5.4)

15 Sec. 5.4. Out-of-state hospitals.

16 (a) Nothing in this Section shall prohibit the transfer of
17 a patient in need of medical services from a hospital that has
18 been designated as a trauma center by the Department in
19 accordance with Section 3.90 of the Emergency Medical Services
20 (EMS) Systems Act.

21 (b) A transfer hospital, treatment hospital with approved
22 pediatric transfer, or approved pediatric health care facility
23 may transfer a sexual assault survivor to an out-of-state
24 hospital that ~~has been designated as a trauma center by the~~
25 ~~Department under Section 3.90 of the Emergency Medical~~

1 ~~Services (EMS) Systems Act if the out-of-state hospital:~~ (1)
2 submits an areawide treatment plan approved by the Department;
3 and (2) has certified the following to the Department in a form
4 and manner prescribed by the Department that the out-of-state
5 hospital will:

6 (i) consent to the jurisdiction of the Department in
7 accordance with Section 2.06 of this Act;

8 (ii) comply with all requirements of this Act
9 applicable to treatment hospitals, including, but not
10 limited to, offering evidence collection to: (A) any
11 Illinois sexual assault survivor 13 years of age or older
12 who presents with a complaint of sexual assault within a
13 minimum of the last 7 days or who has disclosed past sexual
14 assault by a specific individual and was in the care of
15 that individual within a minimum of the last 7 days and not
16 billing the sexual assault survivor for medical forensic
17 services or 90 days of follow-up healthcare; and (B) any
18 Illinois pediatric sexual assault survivor who presents
19 with a complaint of sexual assault within a minimum of 96
20 hours or who has disclosed past sexual assault by a
21 specific individual and was in the care of that individual
22 within a minimum of 96 hours and not billing the sexual
23 assault survivor for medical forensic services or 90 days
24 of follow-up healthcare;

25 (iii) use an Illinois State Police Sexual Assault
26 Evidence Collection Kit to collect forensic evidence from

1 an Illinois sexual assault survivor;

2 (iv) ensure its staff cooperates with Illinois law
3 enforcement agencies and are responsive to subpoenas
4 issued by Illinois courts; and

5 (v) provide appropriate transportation upon the
6 completion of medical forensic services back to the
7 transfer hospital or treatment hospital with pediatric
8 transfer where the sexual assault survivor initially
9 presented seeking medical forensic services, unless the
10 sexual assault survivor chooses to arrange his or her own
11 transportation.

12 (c) (Blank) ~~Subsection (b) of this Section is inoperative~~
13 ~~on and after January 1, 2024.~~

14 (Source: P.A. 100-775, eff. 1-1-19.)".