



Sen. Laura Fine

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10200SB2392sam001

LRB102 12768 CPF 23641 a

1 AMENDMENT TO SENATE BILL 2392

2 AMENDMENT NO. \_\_\_\_\_. Amend Senate Bill 2392 by replacing  
3 everything after the enacting clause with the following:

4 "Section 5. The Civil Administrative Code of Illinois is  
5 amended by changing Section 5-565 as follows:

6 (20 ILCS 5/5-565) (was 20 ILCS 5/6.06)

7 Sec. 5-565. In the Department of Public Health.

8 (a) The General Assembly declares it to be the public  
9 policy of this State that all residents ~~citizens~~ of Illinois  
10 are entitled to lead healthy lives. Governmental public health  
11 has a specific responsibility to ensure that a public health  
12 system is in place to allow the public health mission to be  
13 achieved. The public health system is the collection of  
14 public, private, and voluntary entities as well as individuals  
15 and informal associations that contribute to the public's  
16 health within the State. To develop a public health system

1 requires certain core functions to be performed by government.  
2 The State Board of Health is to assume the leadership role in  
3 advising the Director in meeting the following functions:

4 (1) Needs assessment.

5 (2) Statewide health objectives.

6 (3) Policy development.

7 (4) Assurance of access to necessary services.

8 There shall be a State Board of Health composed of 20  
9 persons, all of whom shall be appointed by the Governor, with  
10 the advice and consent of the Senate for those appointed by the  
11 Governor on and after June 30, 1998, and one of whom shall be a  
12 senior citizen age 60 or over. Five members shall be  
13 physicians licensed to practice medicine in all its branches,  
14 one representing a medical school faculty, one who is board  
15 certified in preventive medicine, and one who is engaged in  
16 private practice. One member shall be a chiropractic  
17 physician. One member shall be a dentist; one an environmental  
18 health practitioner; one a local public health administrator;  
19 one a local board of health member; one a registered nurse; one  
20 a physical therapist; one an optometrist; one a veterinarian;  
21 one a public health academician; one a health care industry  
22 representative; one a representative of the business  
23 community; one a representative of the non-profit public  
24 interest community; and 2 shall be citizens at large.

25 The terms of Board of Health members shall be 3 years,  
26 except that members shall continue to serve on the Board of

1 Health until a replacement is appointed. Upon the effective  
2 date of Public Act 93-975 (January 1, 2005) ~~this amendatory~~  
3 ~~Act of the 93rd General Assembly~~, in the appointment of the  
4 Board of Health members appointed to vacancies or positions  
5 with terms expiring on or before December 31, 2004, the  
6 Governor shall appoint up to 6 members to serve for terms of 3  
7 years; up to 6 members to serve for terms of 2 years; and up to  
8 5 members to serve for a term of one year, so that the term of  
9 no more than 6 members expire in the same year. All members  
10 shall be legal residents of the State of Illinois. The duties  
11 of the Board shall include, but not be limited to, the  
12 following:

13 (1) To advise the Department of ways to encourage  
14 public understanding and support of the Department's  
15 programs.

16 (2) To evaluate all boards, councils, committees,  
17 authorities, and bodies advisory to, or an adjunct of, the  
18 Department of Public Health or its Director for the  
19 purpose of recommending to the Director one or more of the  
20 following:

21 (i) The elimination of bodies whose activities are  
22 not consistent with goals and objectives of the  
23 Department.

24 (ii) The consolidation of bodies whose activities  
25 encompass compatible programmatic subjects.

26 (iii) The restructuring of the relationship

1           between the various bodies and their integration  
2           within the organizational structure of the Department.

3           (iv) The establishment of new bodies deemed  
4           essential to the functioning of the Department.

5           (3) To serve as an advisory group to the Director for  
6           public health emergencies and control of health hazards.

7           (4) To advise the Director regarding public health  
8           policy, and to make health policy recommendations  
9           regarding priorities to the Governor through the Director.

10          (5) To present public health issues to the Director  
11          and to make recommendations for the resolution of those  
12          issues.

13          (6) To recommend studies to delineate public health  
14          problems.

15          (7) To make recommendations to the Governor through  
16          the Director regarding the coordination of State public  
17          health activities with other State and local public health  
18          agencies and organizations.

19          (8) To report on or before February 1 of each year on  
20          the health of the residents of Illinois to the Governor,  
21          the General Assembly, and the public.

22          (9) To review the final draft of all proposed  
23          administrative rules, other than emergency or peremptory  
24          ~~preemptory~~ rules and those rules that another advisory  
25          body must approve or review within a statutorily defined  
26          time period, of the Department after September 19, 1991

1 (the effective date of Public Act 87-633). The Board shall  
2 review the proposed rules within 90 days of submission by  
3 the Department. The Department shall take into  
4 consideration any comments and recommendations of the  
5 Board regarding the proposed rules prior to submission to  
6 the Secretary of State for initial publication. If the  
7 Department disagrees with the recommendations of the  
8 Board, it shall submit a written response outlining the  
9 reasons for not accepting the recommendations.

10 In the case of proposed administrative rules or  
11 amendments to administrative rules regarding immunization  
12 of children against preventable communicable diseases  
13 designated by the Director under the Communicable Disease  
14 Prevention Act, after the Immunization Advisory Committee  
15 has made its recommendations, the Board shall conduct 3  
16 public hearings, geographically distributed throughout the  
17 State. At the conclusion of the hearings, the State Board  
18 of Health shall issue a report, including its  
19 recommendations, to the Director. The Director shall take  
20 into consideration any comments or recommendations made by  
21 the Board based on these hearings.

22 (10) To deliver to the Governor for presentation to  
23 the General Assembly a State Health Assessment (SHA) and a  
24 State Health Improvement Plan (SHIP). The first 5 ~~3~~ such  
25 plans shall be delivered to the Governor on January 1,  
26 2006, January 1, 2009, ~~and~~ January 1, 2016, January 1,

1       2021, and June 30, 2022, and then every 5 years  
2 thereafter.

3       The State Health Assessment and State Health  
4 Improvement Plan ~~Plan~~ shall assess and recommend  
5 priorities and strategies to improve the public health  
6 system, ~~and~~ the health status of Illinois residents,  
7 reduce health disparities and inequities, and promote  
8 health equity. The State Health Assessment and State  
9 Health Improvement Plan development and implementation  
10 shall conform to national Public Health Accreditation  
11 Board Standards. The State Health Assessment and State  
12 Health Improvement Plan development and implementation  
13 process shall be carried out with the administrative and  
14 operational support of the Department of Public Health  
15 ~~taking into consideration national health objectives and~~  
16 ~~system standards as frameworks for assessment.~~

17       The State Health Assessment shall include  
18 comprehensive, broad-based data and information from a  
19 variety of sources on health status and the public health  
20 system including:

21           (i) quantitative data, if it is available, on the  
22 demographics and health status of the population,  
23 including data over time on health by gender identity,  
24 sexual orientation, race, ethnicity, age,  
25 socio-economic factors, geographic region, disability  
26 status, and other indicators of disparity;

1           (ii) quantitative data on social and structural  
2           issues affecting health (social and structural  
3           determinants of health), including, but not limited  
4           to, housing, transportation, educational attainment,  
5           employment, and income inequality;

6           (iii) priorities and strategies developed at the  
7           community level through the Illinois Project for Local  
8           Assessment of Needs (IPLAN) and other local and  
9           regional community health needs assessments;

10           (iv) qualitative data representing the  
11           population's input on health concerns and well-being,  
12           including the perceptions of people experiencing  
13           disparities and health inequities;

14           (v) information on health disparities and health  
15           inequities; and

16           (vi) information on public health system strengths  
17           and areas for improvement.

18           ~~The Plan shall also take into consideration priorities~~  
19           ~~and strategies developed at the community level through~~  
20           ~~the Illinois Project for Local Assessment of Needs (IPLAN)~~  
21           ~~and any regional health improvement plans that may be~~  
22           ~~developed.~~

23           The State Health Improvement Plan ~~Plan~~ shall focus on  
24           prevention, social determinants of health, and promoting  
25           health equity as key strategies ~~as a key strategy~~ for  
26           long-term health improvement in Illinois.

1           The State Health Improvement Plan ~~Plan~~ shall identify  
2 priority State health issues and social issues affecting  
3 health, and shall examine and make recommendations on the  
4 contributions and strategies of the public and private  
5 sectors for improving health status and the public health  
6 system in the State. In addition to recommendations on  
7 health status improvement priorities and strategies for  
8 the population of the State as a whole, the State Health  
9 Improvement Plan ~~Plan~~ shall make recommendations, provided  
10 that data exists to support such recommendations,  
11 regarding priorities and strategies for reducing and  
12 eliminating health disparities and health inequities in  
13 Illinois; including racial, ethnic, gender identification,  
14 sexual orientation, age, disability, socio-economic, and  
15 geographic disparities. The State Health Improvement Plan  
16 shall make recommendations regarding social determinants  
17 of health, such as housing, transportation, educational  
18 attainment, employment, and income inequality.

19           The development and implementation of the State Health  
20 Assessment and State Health Improvement Plan shall be a  
21 collaborative public-private cross-agency effort overseen  
22 by the SHA and SHIP Partnership. The Director of Public  
23 Health shall consult with the Governor to ensure  
24 participation by the head of State agencies with public  
25 health responsibilities (or their designees) in the SHA  
26 and SHIP Partnership, including, but not limited to, the



1 Department of Public Health, the Department of Human  
2 Services, the Department of Healthcare and Family  
3 Services, the Department of Children and Family Services,  
4 the Environmental Protection Agency, the Illinois State  
5 Board of Education, the Department on Aging, the Illinois  
6 Housing Development Authority, the Illinois Criminal  
7 Justice Information Authority, the Department of  
8 Agriculture, the Department of Transportation, the  
9 Department of Corrections, the Department of Commerce and  
10 Economic Opportunity, and the Chair of the State Board of  
11 Health to also serve on the Partnership. A member of the  
12 Governors' staff shall participate in the Partnership and  
13 serve as a liaison to the Governors' office.

14 The Director of ~~the Illinois Department of~~ Public  
15 Health shall appoint a minimum of 15 other members of the  
16 SHA and SHIP Partnership representing a Planning Team that  
17 ~~includes~~ a range of public, private, and voluntary sector  
18 stakeholders and participants in the public health system.  
19 For the first SHA and SHIP Partnership after the effective  
20 date of this amendatory Act of the 102nd General Assembly,  
21 one-half of the members shall be appointed for a 3-year  
22 term, and one-half of the members shall be appointed for a  
23 5-year term. Subsequently, members shall be appointed to  
24 5-year terms. Should any member not be able to fulfill his  
25 or her term, the Director may appoint a replacement to  
26 complete that term. The Director, in consultation with the

1       SHA and SHIP Partnership, may engage additional  
2       individuals and organizations to serve on subcommittees  
3       and ad hoc efforts to conduct the State Health Assessment  
4       and develop and implement the State Health Improvement  
5       Plan. Members of the SHA and SHIP Partnership shall  
6       receive no compensation for serving as members, but may be  
7       reimbursed for their necessary expenses if departmental  
8       resources allow.

9       The SHA and SHIP Partnership ~~This Team~~ shall include:  
10      ~~the directors of State agencies with public health~~  
11      ~~responsibilities (or their designees), including but not~~  
12      ~~limited to the Illinois Departments of Public Health and~~  
13      ~~Department of Human Services,~~ representatives of local  
14      health departments, ~~representatives of local community~~  
15      ~~health partnerships,~~ and individuals with expertise who  
16      represent an array of organizations and constituencies  
17      engaged in public health improvement and prevention, such  
18      as non-profit public interest groups, groups serving  
19      populations that experience health disparities and health  
20      inequities, groups addressing social determinants of  
21      health, health issue groups, faith community groups,  
22      health care providers, businesses and employers, academic  
23      institutions, and community-based organizations.

24      The Director shall endeavor to make the membership of  
25      the Partnership diverse and inclusive of the racial,  
26      ethnic, gender, socio-economic, and geographic diversity

1 of the State. The SHA and SHIP Partnership shall be  
2 chaired by the Director of Public Health or his or her  
3 designee.

4 The SHA and SHIP Partnership shall develop and  
5 implement a community engagement process that facilitates  
6 input into the development of the State Health Assessment  
7 and State Health Improvement Plan. This engagement process  
8 shall ensure that individuals with lived experience in the  
9 issues addressed in the State Health Assessment and State  
10 Health Improvement Plan are meaningfully engaged in the  
11 development and implementation of the State Health  
12 Assessment and State Health Improvement Plan.

13 The State Board of Health shall hold at least 3 public  
14 hearings addressing a draft of the State Health  
15 Improvement Plan ~~drafts of the Plan~~ in representative  
16 geographic areas of the State. ~~Members of the Planning~~  
17 ~~Team shall receive no compensation for their services, but~~  
18 ~~may be reimbursed for their necessary expenses.~~

19 ~~Upon the delivery of each State Health Improvement~~  
20 ~~Plan, the Governor shall appoint a SHIP Implementation~~  
21 ~~Coordination Council that includes a range of public,~~  
22 ~~private, and voluntary sector stakeholders and~~  
23 ~~participants in the public health system. The Council~~  
24 ~~shall include the directors of State agencies and entities~~  
25 ~~with public health system responsibilities (or their~~  
26 ~~designees), including but not limited to the Department of~~

1 ~~Public Health, Department of Human Services, Department of~~  
2 ~~Healthcare and Family Services, Environmental Protection~~  
3 ~~Agency, Illinois State Board of Education, Department on~~  
4 ~~Aging, Illinois Violence Prevention Authority, Department~~  
5 ~~of Agriculture, Department of Insurance, Department of~~  
6 ~~Financial and Professional Regulation, Department of~~  
7 ~~Transportation, and Department of Commerce and Economic~~  
8 ~~Opportunity and the Chair of the State Board of Health.~~  
9 ~~The Council shall include representatives of local health~~  
10 ~~departments and individuals with expertise who represent~~  
11 ~~an array of organizations and constituencies engaged in~~  
12 ~~public health improvement and prevention, including~~  
13 ~~non-profit public interest groups, health issue groups,~~  
14 ~~faith community groups, health care providers, businesses~~  
15 ~~and employers, academic institutions, and community based~~  
16 ~~organizations. The Governor shall endeavor to make the~~  
17 ~~membership of the Council representative of the racial,~~  
18 ~~ethnic, gender, socio economic, and geographic diversity~~  
19 ~~of the State. The Governor shall designate one State~~  
20 ~~agency representative and one other non governmental~~  
21 ~~member as co chairs of the Council. The Governor shall~~  
22 ~~designate a member of the Governor's office to serve as~~  
23 ~~liaison to the Council and one or more State agencies to~~  
24 ~~provide or arrange for support to the Council. The members~~  
25 ~~of the SHIP Implementation Coordination Council for each~~  
26 ~~State Health Improvement Plan shall serve until the~~

1 ~~delivery of the subsequent State Health Improvement Plan,~~  
2 ~~whereupon a new Council shall be appointed. Members of the~~  
3 ~~SHIP Planning Team may serve on the SHIP Implementation~~  
4 ~~Coordination Council if so appointed by the Governor.~~

5 Upon the delivery of each State Health Assessment and  
6 State Health Improvement Plan, the SHA and SHIP  
7 Partnership ~~The SHIP Implementation Coordination Council~~  
8 shall coordinate the efforts and engagement of the public,  
9 private, and voluntary sector stakeholders and  
10 participants in the public health system to implement each  
11 SHIP. The Partnership Council shall serve as a forum for  
12 collaborative action; coordinate existing and new  
13 initiatives; develop detailed implementation steps, with  
14 mechanisms for action; implement specific projects;  
15 identify public and private funding sources at the local,  
16 State and federal level; promote public awareness of the  
17 SHIP; and advocate for the implementation of the SHIP. The  
18 SHA and SHIP Partnership shall implement strategies to  
19 ensure that individuals and communities affected by health  
20 disparities and health inequities are engaged in the  
21 process throughout the 5-year cycle. The SHA and SHIP  
22 Partnership shall regularly evaluate and update the State  
23 Health Assessment and track implementation of the State  
24 Health Improvement Plan with revisions as necessary. The  
25 SHA and SHIP Partnership shall not have the authority to  
26 direct any public or private entity to take specific

1 ~~action to implement the SHIP.; and develop an annual~~  
2 ~~report to the Governor, General Assembly, and public~~  
3 ~~regarding the status of implementation of the SHIP. The~~  
4 ~~Council shall not, however, have the authority to direct~~  
5 ~~any public or private entity to take specific action to~~  
6 ~~implement the SHIP.~~

7 The State Board of Health shall submit a report by  
8 January 31 of each year on the status of State Health  
9 Improvement Plan implementation and community engagement  
10 activities to the Governor, General Assembly, and public.  
11 In the fifth year, the report may be consolidated into the  
12 new State Health Assessment and State Health Improvement  
13 Plan.

14 (11) Upon the request of the Governor, to recommend to  
15 the Governor candidates for Director of Public Health when  
16 vacancies occur in the position.

17 (12) To adopt bylaws for the conduct of its own  
18 business, including the authority to establish ad hoc  
19 committees to address specific public health programs  
20 requiring resolution.

21 (13) (Blank).

22 Upon appointment, the Board shall elect a chairperson from  
23 among its members.

24 Members of the Board shall receive compensation for their  
25 services at the rate of \$150 per day, not to exceed \$10,000 per  
26 year, as designated by the Director for each day required for

1 transacting the business of the Board and shall be reimbursed  
2 for necessary expenses incurred in the performance of their  
3 duties. The Board shall meet from time to time at the call of  
4 the Department, at the call of the chairperson, or upon the  
5 request of 3 of its members, but shall not meet less than 4  
6 times per year.

7 (b) (Blank).

8 (c) An Advisory Board on Necropsy Service to Coroners,  
9 which shall counsel and advise with the Director on the  
10 administration of the Autopsy Act. The Advisory Board shall  
11 consist of 11 members, including a senior citizen age 60 or  
12 over, appointed by the Governor, one of whom shall be  
13 designated as chairman by a majority of the members of the  
14 Board. In the appointment of the first Board the Governor  
15 shall appoint 3 members to serve for terms of 1 year, 3 for  
16 terms of 2 years, and 3 for terms of 3 years. The members first  
17 appointed under Public Act 83-1538 shall serve for a term of 3  
18 years. All members appointed thereafter shall be appointed for  
19 terms of 3 years, except that when an appointment is made to  
20 fill a vacancy, the appointment shall be for the remaining  
21 term of the position vacant. The members of the Board shall be  
22 citizens of the State of Illinois. In the appointment of  
23 members of the Advisory Board the Governor shall appoint 3  
24 members who shall be persons licensed to practice medicine and  
25 surgery in the State of Illinois, at least 2 of whom shall have  
26 received post-graduate training in the field of pathology; 3

1 members who are duly elected coroners in this State; and 5  
2 members who shall have interest and abilities in the field of  
3 forensic medicine but who shall be neither persons licensed to  
4 practice any branch of medicine in this State nor coroners. In  
5 the appointment of medical and coroner members of the Board,  
6 the Governor shall invite nominations from recognized medical  
7 and coroners organizations in this State respectively. Board  
8 members, while serving on business of the Board, shall receive  
9 actual necessary travel and subsistence expenses while so  
10 serving away from their places of residence.

11 (Source: P.A. 98-463, eff. 8-16-13; 99-527, eff. 1-1-17;  
12 revised 7-17-19.)

13 Section 99. Effective date. This Act takes effect upon  
14 becoming law.".