

1 AN ACT concerning health.

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

4 Section 5. The Sexual Assault Survivors Emergency
5 Treatment Act is amended by changing Sections 1a, 1a-1, 2-1,
6 5-1, 5.4, 5.5, 5.5-1, 7.5, and 9.5 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
17 care facility, other than a hospital, with a sexual assault
18 treatment plan approved by the Department to provide medical
19 forensic services to pediatric sexual assault survivors who
20 present with a complaint of sexual assault within a minimum of
21 the last 7 days or who have disclosed past sexual assault by a
22 specific individual and were in the care of that individual
23 within a minimum of the last 7 days.

1 "Areawide sexual assault treatment plan" means a plan,
2 developed by hospitals or by hospitals and approved pediatric
3 health care facilities in a community or area to be served,
4 which provides for medical forensic services to sexual assault
5 survivors that shall be made available by each of the
6 participating hospitals and approved pediatric health care
7 facilities.

8 "Board-certified child abuse pediatrician" means a
9 physician certified by the American Board of Pediatrics in
10 child abuse pediatrics.

11 "Board-eligible child abuse pediatrician" means a
12 physician who has completed the requirements set forth by the
13 American Board of Pediatrics to take the examination for
14 certification in child abuse pediatrics.

15 "Department" means the Department of Public Health.

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

20 "Follow-up healthcare" means healthcare services related
21 to a sexual assault, including laboratory services and
22 pharmacy services, rendered within 180 ~~90~~ days of the initial
23 visit for medical forensic services.

24 "Health care professional" means a physician, a physician
25 assistant, a sexual assault forensic examiner, an advanced
26 practice registered nurse, a registered professional nurse, a

1 licensed practical nurse, or a sexual assault nurse examiner.

2 "Hospital" means a hospital licensed under the Hospital
3 Licensing Act or operated under the University of Illinois
4 Hospital Act, any outpatient center included in the hospital's
5 sexual assault treatment plan where hospital employees provide
6 medical forensic services, and an out-of-state hospital that
7 has consented to the jurisdiction of the Department under
8 Section 2.06.

9 "Illinois State Police Sexual Assault Evidence Collection
10 Kit" means a prepackaged set of materials and forms to be used
11 for the collection of evidence relating to sexual assault. The
12 standardized evidence collection kit for the State of Illinois
13 shall be the Illinois State Police Sexual Assault Evidence
14 Collection Kit.

15 "Law enforcement agency having jurisdiction" means the law
16 enforcement agency in the jurisdiction where an alleged sexual
17 assault or sexual abuse occurred.

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

20 "Medical forensic services" means health care delivered to
21 patients within or under the care and supervision of personnel
22 working in a designated emergency department of a hospital or
23 an approved pediatric health care facility. "Medical forensic
24 services" includes, but is not limited to, taking a medical
25 history, performing photo documentation, performing a physical
26 and anogenital examination, assessing the patient for evidence

1 collection, collecting evidence in accordance with a statewide
2 sexual assault evidence collection program administered by the
3 Illinois State Police using the Illinois State Police Sexual
4 Assault Evidence Collection Kit, if appropriate, assessing the
5 patient for drug-facilitated or alcohol-facilitated sexual
6 assault, providing an evaluation of and care for sexually
7 transmitted infection and human immunodeficiency virus (HIV),
8 pregnancy risk evaluation and care, and discharge and
9 follow-up healthcare planning.

10 "Pediatric health care facility" means a clinic or
11 physician's office that provides medical services to pediatric
12 patients.

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

17 "Photo documentation" means digital photographs or
18 colposcope videos stored and backed up securely in the
19 original file format.

20 "Physician" means a person licensed to practice medicine
21 in all its branches.

22 "Physician assistant" has the meaning provided in Section
23 4 of the Physician Assistant Practice Act of 1987.

24 "Prepubescent sexual assault survivor" means a female who
25 is under the age of 18 years and has not had a first menstrual
26 cycle or a male who is under the age of 18 years and has not

1 started to develop secondary sex characteristics who presents
2 for medical forensic services in relation to injuries or
3 trauma resulting from a sexual assault.

4 "Qualified medical provider" means a board-certified child
5 abuse pediatrician, board-eligible child abuse pediatrician, a
6 sexual assault forensic examiner, or a sexual assault nurse
7 examiner who has access to photo documentation tools, and who
8 participates in peer review.

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

11 "Sexual assault" means:

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

15 (2) any act of sexual penetration; as used in this
16 paragraph, "sexual penetration" has the meaning provided
17 under Section 11-0.1 of the Criminal Code of 2012 and
18 includes, without limitation, acts prohibited under
19 Sections 11-1.20 through 11-1.60 of the Criminal Code of
20 2012.

21 "Sexual assault forensic examiner" means a physician or
22 physician assistant who has completed training that meets or
23 is substantially similar to the Sexual Assault Nurse Examiner
24 Education Guidelines established by the International
25 Association of Forensic Nurses.

26 "Sexual assault nurse examiner" means an advanced practice

1 registered nurse or registered professional nurse who has
2 completed a sexual assault nurse examiner training program
3 that meets the Sexual Assault Nurse Examiner Education
4 Guidelines established by the International Association of
5 Forensic Nurses.

6 "Sexual assault services voucher" means a document
7 generated by a hospital or approved pediatric health care
8 facility at the time the sexual assault survivor receives
9 outpatient medical forensic services that may be used to seek
10 payment for any ambulance services, medical forensic services,
11 laboratory services, pharmacy services, and follow-up
12 healthcare provided as a result of the sexual assault.

13 "Sexual assault survivor" means a person who presents for
14 medical forensic services in relation to injuries or trauma
15 resulting from a sexual assault.

16 "Sexual assault transfer plan" means a written plan
17 developed by a hospital and approved by the Department, which
18 describes the hospital's procedures for transferring sexual
19 assault survivors to another hospital, and an approved
20 pediatric health care facility, if applicable, in order to
21 receive medical forensic services.

22 "Sexual assault treatment plan" means a written plan that
23 describes the procedures and protocols for providing medical
24 forensic services to sexual assault survivors who present
25 themselves for such services, either directly or through
26 transfer from a hospital or an approved pediatric health care

1 facility.

2 "Transfer hospital" means a hospital with a sexual assault
3 transfer plan approved by the Department.

4 "Transfer services" means the appropriate medical
5 screening examination and necessary stabilizing treatment
6 prior to the transfer of a sexual assault survivor to a
7 hospital or an approved pediatric health care facility that
8 provides medical forensic services to sexual assault survivors
9 pursuant to a sexual assault treatment plan or areawide sexual
10 assault treatment plan.

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

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

26 (b) This Section is effective on and after January 1, 2024

1 ~~2022.~~

2 (Source: P.A. 101-81, eff. 7-12-19; 101-634, eff. 6-5-20;
3 102-22, eff. 6-25-21; 102-538, eff. 8-20-21; 102-674, eff.
4 11-30-21; revised 12-16-21.)

5 (410 ILCS 70/1a-1)

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

7 Sec. 1a-1. Definitions.

8 (a) In this Act:

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

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

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

23 "Approved federally qualified health center" means a
24 facility as defined in Section 1905(1)(2)(B) of the federal
25 Social Security Act with a sexual assault treatment plan

1 approved by the Department to provide medical forensic
2 services to sexual assault survivors 13 years old or older who
3 present with a complaint of sexual assault within a minimum of
4 the last 7 days or who have disclosed past sexual assault by a
5 specific individual and were in the care of that individual
6 within a minimum of the last 7 days.

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

15 "Board-certified child abuse pediatrician" means a
16 physician certified by the American Board of Pediatrics in
17 child abuse pediatrics.

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

22 "Department" means the Department of Public Health.

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

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

5 "Follow-up healthcare" means healthcare services related
6 to a sexual assault, including laboratory services and
7 pharmacy services, rendered within 180 ~~90~~ days of the initial
8 visit for medical forensic services.

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

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

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

26 "Law enforcement agency having jurisdiction" means the law

1 enforcement agency in the jurisdiction where an alleged sexual
2 assault or sexual abuse occurred.

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

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

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

23 "Pediatric health care facility" means a clinic or
24 physician's office that provides medical services to pediatric
25 patients.

26 "Pediatric sexual assault survivor" means a person under

1 the age of 13 who presents for medical forensic services in
2 relation to injuries or trauma resulting from a sexual
3 assault.

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

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

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

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

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

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

24 "Sexual assault" means:

25 (1) an act of sexual conduct; as used in this
26 paragraph, "sexual conduct" has the meaning provided under

1 Section 11-0.1 of the Criminal Code of 2012; or

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

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

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

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

26 "Sexual assault survivor" means a person who presents for

1 medical forensic services in relation to injuries or trauma
2 resulting from a sexual assault.

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

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

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

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

24 "Treatment hospital" means a hospital with a sexual
25 assault treatment plan approved by the Department to provide
26 medical forensic services to all sexual assault survivors who

1 present with a complaint of sexual assault within a minimum of
2 the last 7 days or who have disclosed past sexual assault by a
3 specific individual and were in the care of that individual
4 within a minimum of the last 7 days.

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

13 (b) 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 70/2-1)

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

18 Sec. 2-1. Hospital, approved pediatric health care
19 facility, and approved federally qualified health center
20 requirements for sexual assault plans.

21 (a) Every hospital required to be licensed by the
22 Department pursuant to the Hospital Licensing Act, or operated
23 under the University of Illinois Hospital Act that provides
24 general medical and surgical hospital services shall provide
25 either (i) transfer services to all sexual assault survivors,

1 (ii) medical forensic services to all sexual assault
2 survivors, or (iii) transfer services to pediatric sexual
3 assault survivors and medical forensic services to sexual
4 assault survivors 13 years old or older, in accordance with
5 rules adopted by the Department.

6 In addition, every such hospital, regardless of whether or
7 not a request is made for reimbursement, shall submit to the
8 Department a plan to provide either (i) transfer services to
9 all sexual assault survivors, (ii) medical forensic services
10 to all sexual assault survivors, or (iii) transfer services to
11 pediatric sexual assault survivors and medical forensic
12 services to sexual assault survivors 13 years old or older.
13 The Department shall approve such plan for either (i) transfer
14 services to all sexual assault survivors, (ii) medical
15 forensic services to all sexual assault survivors, or (iii)
16 transfer services to pediatric sexual assault survivors and
17 medical forensic services to sexual assault survivors 13 years
18 old or older, if it finds that the implementation of the
19 proposed plan would provide (i) transfer services or (ii)
20 medical forensic services for sexual assault survivors in
21 accordance with the requirements of this Act and provide
22 sufficient protections from the risk of pregnancy to sexual
23 assault survivors. Notwithstanding anything to the contrary in
24 this paragraph, the Department may approve a sexual assault
25 transfer plan for the provision of medical forensic services
26 if:

1 (1) a treatment hospital with approved pediatric
2 transfer has agreed, as part of an areawide treatment
3 plan, to accept sexual assault survivors 13 years of age
4 or older from the proposed transfer hospital, if the
5 treatment hospital with approved pediatric transfer is
6 geographically closer to the transfer hospital than a
7 treatment hospital or another treatment hospital with
8 approved pediatric transfer and such transfer is not
9 unduly burdensome on the sexual assault survivor; and

10 (2) a treatment hospital has agreed, as a part of an
11 areawide treatment plan, to accept sexual assault
12 survivors under 13 years of age from the proposed transfer
13 hospital and transfer to the treatment hospital would not
14 unduly burden the sexual assault survivor.

15 The Department may not approve a sexual assault transfer
16 plan unless a treatment hospital has agreed, as a part of an
17 areawide treatment plan, to accept sexual assault survivors
18 from the proposed transfer hospital and a transfer to the
19 treatment hospital would not unduly burden the sexual assault
20 survivor.

21 In counties with a population of less than 1,000,000, the
22 Department may not approve a sexual assault transfer plan for
23 a hospital located within a 20-mile radius of a 4-year public
24 university, not including community colleges, unless there is
25 a treatment hospital with a sexual assault treatment plan
26 approved by the Department within a 20-mile radius of the

1 4-year public university.

2 A transfer must be in accordance with federal and State
3 laws and local ordinances.

4 A treatment hospital with approved pediatric transfer must
5 submit an areawide treatment plan under Section 3-1 of this
6 Act that includes a written agreement with a treatment
7 hospital stating that the treatment hospital will provide
8 medical forensic services to pediatric sexual assault
9 survivors transferred from the treatment hospital with
10 approved pediatric transfer. The areawide treatment plan may
11 also include an approved pediatric health care facility.

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

1 hospital. If the areawide treatment plan includes a written
2 agreement with a treatment hospital with approved pediatric
3 transfer, it must also include a written agreement with a
4 treatment hospital stating that the treatment hospital will
5 provide medical forensic services to sexual assault survivors
6 under 13 years of age who are transferred from the transfer
7 hospital.

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

21 After July 1, 2020 or once a treatment hospital or a
22 treatment hospital with approved pediatric transfer certifies
23 compliance with subsection (a-7) of Section 5-1, whichever
24 occurs first, each treatment hospital and treatment hospital
25 with approved pediatric transfer shall ensure that emergency
26 department attending physicians, physician assistants,

1 advanced practice registered nurses, and registered
2 professional nurses providing clinical services, who do not
3 meet the definition of a qualified medical provider in Section
4 1a-1 of this Act, receive a minimum of 2 hours of continuing
5 education on responding to sexual assault survivors every 2
6 years. Protocols for training shall be included in the
7 hospital's sexual assault treatment plan.

8 Sexual assault training provided under this subsection may
9 be provided in person or online and shall include, but not be
10 limited to:

11 (1) information provided on the provision of medical
12 forensic services;

13 (2) information on the use of the Illinois Sexual
14 Assault Evidence Collection Kit;

15 (3) information on sexual assault epidemiology,
16 neurobiology of trauma, drug-facilitated sexual assault,
17 child sexual abuse, and Illinois sexual assault-related
18 laws; and

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

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

24 (b) An approved pediatric health care facility may provide
25 medical forensic services, in accordance with rules adopted by
26 the Department, to all pediatric sexual assault survivors who

1 present for medical forensic services in relation to injuries
2 or trauma resulting from a sexual assault. These services
3 shall be provided by a qualified medical provider.

4 A pediatric health care facility must participate in or
5 submit an areawide treatment plan under Section 3-1 of this
6 Act that includes a treatment hospital. If a pediatric health
7 care facility does not provide certain medical or surgical
8 services that are provided by hospitals, the areawide sexual
9 assault treatment plan must include a procedure for ensuring a
10 sexual assault survivor in need of such medical or surgical
11 services receives the services at the treatment hospital. The
12 areawide treatment plan may also include a treatment hospital
13 with approved pediatric transfer.

14 The Department shall review a proposed sexual assault
15 treatment plan submitted by a pediatric health care facility
16 within 60 days after receipt of the plan. If the Department
17 finds that the proposed plan meets the minimum requirements
18 set forth in Section 5-1 of this Act and that implementation of
19 the proposed plan would provide medical forensic services for
20 pediatric sexual assault survivors, then the Department shall
21 approve the plan. If the Department does not approve a plan,
22 then the Department shall notify the pediatric health care
23 facility that the proposed plan has not been approved. The
24 pediatric health care facility shall have 30 days to submit a
25 revised plan. The Department shall review the revised plan
26 within 30 days after receipt of the plan and notify the

1 pediatric health care facility whether the revised plan is
2 approved or rejected. A pediatric health care facility may not
3 provide medical forensic services to pediatric sexual assault
4 survivors who present with a complaint of sexual assault
5 within a minimum of 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 the last 7 days until the
8 Department has approved a treatment plan.

9 If an approved pediatric health care facility is not open
10 24 hours a day, 7 days a week, it shall post signage at each
11 public entrance to its facility that:

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

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

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

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

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

24 (6) is posted clearly and conspicuously on or adjacent
25 to the door at each entrance and, if building materials
26 allow, is posted internally for viewing through glass; if

1 posted externally, the sign shall be made of
2 weather-resistant and theft-resistant materials,
3 non-removable, and adhered permanently to the building;
4 and

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

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

1 form and manner prescribed by the Department, that it employs
2 or contracts with a qualified medical provider in accordance
3 with subsection (a-7) of Section 5-1, whichever occurs first.

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

15 The Department shall review a proposed sexual assault
16 treatment plan submitted by a federally qualified health
17 center within 14 days after receipt of the plan. If the
18 Department finds that the proposed plan meets the minimum
19 requirements set forth in Section 5-1 and that implementation
20 of the proposed plan would provide medical forensic services
21 for sexual assault survivors 13 years old or older, then the
22 Department shall approve the plan. The Department shall not
23 approve sexual assault treatment plans for more than 6
24 federally qualified health centers, which must be located in
25 geographically diverse areas of the State. If the Department
26 does not approve a plan, then the Department shall notify the

1 federally qualified health center that the proposed plan has
2 not been approved. The federally qualified health center shall
3 have 14 days to submit a revised plan. The Department shall
4 review the revised plan within 14 days after receipt of the
5 plan and notify the federally qualified health center whether
6 the revised plan is approved or rejected. A federally
7 qualified health center may not (i) provide medical forensic
8 services to sexual assault survivors 13 years old or older who
9 present with a complaint of sexual assault within a minimum of
10 the previous 7 days or (ii) 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 previous 7 days until the
13 Department has approved a treatment plan.

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

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

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

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

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

25 (5) has a black background with white bold capital
26 lettering in a clear and easy to read font that is at least

1 72-point type, and with "call 911" in at least 125-point
2 type;

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

10 (7) has lighting that is part of the sign itself or is
11 lit with a dedicated light that fully illuminates the
12 sign;

13 (8) directs those seeking services as follows: "Call
14 the local rape crisis center for support."; and

15 (9) includes the name and hotline number, available 24
16 hours a day, 7 days a week, of the local rape crisis
17 center.

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

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

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

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

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

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

22 (2) The total number of Illinois Sexual Assault
23 Evidence Collection Kits:

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

1 (B) completed for (i) all sexual assault survivors
2 and (ii) pediatric sexual assault survivors; and

3 (C) declined by (i) all sexual assault survivors
4 and (ii) pediatric sexual assault survivors.

5 This information shall be made available on the
6 Department's website.

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

8 (Source: P.A. 101-634, eff. 6-5-20; 102-22, eff. 6-25-21;
9 102-674, eff. 11-30-21.)

10 (410 ILCS 70/5-1)

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

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

16 (a) Every hospital, approved pediatric health care
17 facility, and approved federally qualified health center
18 providing medical forensic services to sexual assault
19 survivors under this Act shall, as minimum requirements for
20 such services, provide, with the consent of the sexual assault
21 survivor, and as ordered by the attending physician, an
22 advanced practice registered nurse, or a physician assistant,
23 the services set forth in subsection (a-5).

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

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

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

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

23 Records of medical forensic services of sexual assault
24 survivors under the age of 18 shall be retained by the
25 hospital for a period of 60 years after the sexual assault
26 survivor reaches the age of 18. Records of medical

1 forensic services of sexual assault survivors 18 years of
2 age or older shall be retained by the hospital for a period
3 of 20 years after the date the record was created.

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

7 (1.5) An offer to complete the Illinois Sexual Assault
8 Evidence Collection Kit for any sexual assault survivor
9 who presents within a minimum of the last 7 days of the
10 assault or who has disclosed past sexual assault by a
11 specific individual and was in the care of that individual
12 within a minimum of the last 7 days.

13 (A) Appropriate oral and written information
14 concerning evidence-based guidelines for the
15 appropriateness of evidence collection depending on
16 the sexual development of the sexual assault survivor,
17 the type of sexual assault, and the timing of the
18 sexual assault shall be provided to the sexual assault
19 survivor. Evidence collection is encouraged for
20 prepubescent sexual assault survivors who present to a
21 hospital or approved pediatric health care facility
22 with a complaint of sexual assault within a minimum of
23 96 hours after the sexual assault.

24 Before January 1, 2023, the information required
25 under this subparagraph shall be provided in person by
26 the health care professional providing medical

1 forensic services directly to the sexual assault
2 survivor.

3 On and after January 1, 2023, the information
4 required under this subparagraph shall be provided in
5 person by the qualified medical provider providing
6 medical forensic services directly to the sexual
7 assault survivor.

8 The written information provided shall be the
9 information created in accordance with Section 10-1 of
10 this Act.

11 (B) Following the discussion regarding the
12 evidence-based guidelines for evidence collection in
13 accordance with subparagraph (A), evidence collection
14 must be completed at the sexual assault survivor's
15 request. A sexual assault nurse examiner conducting an
16 examination using the Illinois State Police Sexual
17 Assault Evidence Collection Kit may do so without the
18 presence or participation of a physician.

19 (2) Appropriate oral and written information
20 concerning the possibility of infection, sexually
21 transmitted infection, including an evaluation of the
22 sexual assault survivor's risk of contracting human
23 immunodeficiency virus (HIV) from sexual assault, and
24 pregnancy resulting from sexual assault.

25 (3) Appropriate oral and written information
26 concerning accepted medical procedures, laboratory tests,

1 medication, and possible contraindications of such
2 medication available for the prevention or treatment of
3 infection or disease resulting from sexual assault.

4 (3.5) After a medical evidentiary or physical
5 examination, access to a shower at no cost, unless
6 showering facilities are unavailable.

7 (4) An amount of medication, including HIV
8 prophylaxis, for treatment at the hospital, ~~or~~ approved
9 pediatric health care facility, or approved federally
10 qualified health center and after discharge as is deemed
11 appropriate by the attending physician, an advanced
12 practice registered nurse, or a physician assistant in
13 accordance with the Centers for Disease Control and
14 Prevention guidelines and consistent with the hospital's
15 or approved pediatric health care facility's current
16 approved protocol for sexual assault survivors.

17 (5) Photo documentation of the sexual assault
18 survivor's injuries, anatomy involved in the assault, or
19 other visible evidence on the sexual assault survivor's
20 body to supplement the medical forensic history and
21 written documentation of physical findings and evidence
22 beginning July 1, 2019. Photo documentation does not
23 replace written documentation of the injury.

24 (6) Written and oral instructions indicating the need
25 for follow-up examinations and laboratory tests after the
26 sexual assault to determine the presence or absence of

1 sexually transmitted infection.

2 (7) Referral by hospital, ~~or~~ approved pediatric health
3 care facility, or approved federally qualified health
4 center personnel for appropriate counseling.

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

14 (9) Written information regarding services provided by
15 a Children's Advocacy Center and rape crisis center, if
16 applicable.

17 (10) A treatment hospital, a treatment hospital with
18 approved pediatric transfer, an out-of-state hospital as
19 defined in Section 5.4, ~~or~~ an approved pediatric health
20 care facility, or an approved federally qualified health
21 center shall comply with the rules relating to the
22 collection and tracking of sexual assault evidence adopted
23 by the Department of State Police under Section 50 of the
24 Sexual Assault Evidence Submission Act.

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

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

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

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

1 record of the sexual assault survivor. The hospital, approved
2 pediatric health care facility, or approved federally
3 qualified health center shall provide a copy of the voucher to
4 the sexual 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, or approved
8 federally qualified health center.

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

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

12 (410 ILCS 70/5.4)

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

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

19 (b) A transfer hospital, treatment hospital with approved
20 pediatric transfer, or approved pediatric health care facility
21 may transfer a sexual assault survivor to an out-of-state
22 hospital that has been designated as a trauma center by the
23 Department under Section 3.90 of the Emergency Medical
24 Services (EMS) Systems Act if the out-of-state hospital: (1)
25 submits an areawide treatment plan approved by the Department;

1 and (2) has certified the following to the Department in a form
2 and manner prescribed by the Department that the out-of-state
3 hospital will:

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

6 (ii) comply with all requirements of this Act
7 applicable to treatment hospitals, including, but not
8 limited to, offering evidence collection to any Illinois
9 sexual assault survivor who presents with a complaint of
10 sexual assault within a minimum of the last 7 days or who
11 has disclosed past sexual assault by a specific individual
12 and was in the care of that individual within a minimum of
13 the last 7 days and not billing the sexual assault
14 survivor for medical forensic services or 180 ~~90~~ days of
15 follow-up healthcare;

16 (iii) use an Illinois State Police Sexual Assault
17 Evidence Collection Kit to collect forensic evidence from
18 an Illinois sexual assault survivor;

19 (iv) ensure its staff cooperates with Illinois law
20 enforcement agencies and are responsive to subpoenas
21 issued by Illinois courts; and

22 (v) provide appropriate transportation upon the
23 completion of medical forensic services back to the
24 transfer hospital or treatment hospital with pediatric
25 transfer where the sexual assault survivor initially
26 presented seeking medical forensic services, unless the

1 sexual assault survivor chooses to arrange his or her own
2 transportation.

3 (c) Subsection (b) of this Section is inoperative on and
4 after January 1, 2024.

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

6 (410 ILCS 70/5.5)

7 Sec. 5.5. Minimum reimbursement requirements for follow-up
8 healthcare.

9 (a) Every hospital, pediatric health care facility, health
10 care professional, laboratory, or pharmacy that provides
11 follow-up healthcare to a sexual assault survivor, with the
12 consent of the sexual assault survivor and as ordered by the
13 attending physician, an advanced practice registered nurse, or
14 physician assistant shall be reimbursed for the follow-up
15 healthcare services provided. Follow-up healthcare services
16 include, but are not limited to, the following:

17 (1) a physical examination;

18 (2) laboratory tests to determine the presence or
19 absence of sexually transmitted infection; and

20 (3) appropriate medications, including HIV
21 prophylaxis, in accordance with the Centers for Disease
22 Control and Prevention's guidelines.

23 (b) Reimbursable follow-up healthcare is limited to office
24 visits with a physician, advanced practice registered nurse,
25 or physician assistant within 180 ~~90~~ days after an initial

1 visit for hospital medical forensic services.

2 (c) Nothing in this Section requires a hospital, pediatric
3 health care facility, health care professional, laboratory, or
4 pharmacy to provide follow-up healthcare to a sexual assault
5 survivor.

6 (d) This Section is effective on and after January 1,
7 2024.

8 (Source: P.A. 101-634, eff. 6-5-20; 102-22, eff. 6-25-21;
9 102-674, eff. 11-30-21.)

10 (410 ILCS 70/5.5-1)

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

12 Sec. 5.5-1. Minimum reimbursement requirements for
13 follow-up healthcare.

14 (a) Every hospital, pediatric health care facility,
15 federally qualified health center, health care professional,
16 laboratory, or pharmacy that provides follow-up healthcare to
17 a sexual assault survivor, with the consent of the sexual
18 assault survivor and as ordered by the attending physician, an
19 advanced practice registered nurse, or physician assistant
20 shall be reimbursed for the follow-up healthcare services
21 provided. Follow-up healthcare services include, but are not
22 limited to, the following:

23 (1) a physical examination;

24 (2) laboratory tests to determine the presence or
25 absence of sexually transmitted infection; and

1 (3) appropriate medications, including HIV
2 prophylaxis, in accordance with the Centers for Disease
3 Control and Prevention's guidelines.

4 (b) Reimbursable follow-up healthcare is limited to office
5 visits with a physician, advanced practice registered nurse,
6 or physician assistant within 180 ~~90~~ days after an initial
7 visit for hospital medical forensic services.

8 (c) Nothing in this Section requires a hospital, pediatric
9 health care facility, federally qualified health center,
10 health care professional, laboratory, or pharmacy to provide
11 follow-up healthcare to a sexual assault survivor.

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

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

15 (410 ILCS 70/7.5)

16 Sec. 7.5. Prohibition on billing sexual assault survivors
17 directly for certain services; written notice; billing
18 protocols.

19 (a) A hospital, approved pediatric health care facility,
20 health care professional, ambulance provider, laboratory,
21 approved federally qualified health center, or pharmacy
22 furnishing medical forensic services, transportation,
23 follow-up healthcare, or medication to a sexual assault
24 survivor shall not:

25 (1) charge or submit a bill for any portion of the

1 costs of the services, transportation, or medications to
2 the sexual assault survivor, including any insurance
3 deductible, co-pay, co-insurance, denial of claim by an
4 insurer, spenddown, or any other out-of-pocket expense;

5 (2) communicate with, harass, or intimidate the sexual
6 assault survivor for payment of services, including, but
7 not limited to, repeatedly calling or writing to the
8 sexual assault survivor and threatening to refer the
9 matter to a debt collection agency or to an attorney for
10 collection, enforcement, or filing of other process;

11 (3) refer a bill to a collection agency or attorney
12 for collection action against the sexual assault survivor;

13 (4) contact or distribute information to affect the
14 sexual assault survivor's credit rating; or

15 (5) take any other action adverse to the sexual
16 assault survivor or his or her family on account of
17 providing services to the sexual assault survivor.

18 (a-5) Notwithstanding any other provision of law,
19 including, but not limited to, subsection (a), a sexual
20 assault survivor who is not the subscriber or primary
21 policyholder of the sexual assault survivor's insurance policy
22 may opt out of billing the sexual assault survivor's private
23 insurance provider. If the sexual assault survivor opts out of
24 billing the sexual assault survivor's private insurance
25 provider, then the bill for medical forensic services shall be
26 sent to the Department of Healthcare and Family Services'

1 Sexual Assault Emergency Treatment Program for reimbursement
2 for the services provided to the sexual assault survivor.

3 (b) Nothing in this Section precludes a hospital, health
4 care provider, ambulance provider, laboratory, approved
5 federally qualified health center, or pharmacy from billing
6 the sexual assault survivor or any applicable health insurance
7 or coverage for inpatient services.

8 (c) Every hospital and approved pediatric health care
9 facility providing treatment services to sexual assault
10 survivors in accordance with a plan approved under Section 2
11 of this Act shall provide a written notice to a sexual assault
12 survivor. The written notice must include, but is not limited
13 to, the following:

14 (1) a statement that the sexual assault survivor
15 should not be directly billed by any ambulance provider
16 providing transportation services, or by any hospital,
17 approved pediatric health care facility, health care
18 professional, laboratory, or pharmacy for the services the
19 sexual assault survivor received as an outpatient at the
20 hospital or approved pediatric health care facility;

21 (2) a statement that a sexual assault survivor who is
22 admitted to a hospital may be billed for inpatient
23 services provided by a hospital, health care professional,
24 laboratory, or pharmacy;

25 (3) a statement that prior to leaving the hospital or
26 approved pediatric health care facility, the hospital or

1 approved pediatric health care facility will give the
2 sexual assault survivor a sexual assault services voucher
3 for follow-up healthcare if the sexual assault survivor is
4 eligible to receive a sexual assault services voucher;

5 (4) the definition of "follow-up healthcare" as set
6 forth in Section 1a of this Act;

7 (5) a phone number the sexual assault survivor may
8 call should the sexual assault survivor receive a bill
9 from the hospital or approved pediatric health care
10 facility for medical forensic services;

11 (6) the toll-free phone number of the Office of the
12 Illinois Attorney General, which the sexual assault
13 survivor may call should the sexual assault survivor
14 receive a bill from an ambulance provider, approved
15 pediatric health care facility, a health care
16 professional, a laboratory, or a pharmacy.

17 This subsection (c) shall not apply to hospitals that
18 provide transfer services as defined under Section 1a of this
19 Act.

20 (d) Within 60 days after the effective date of this
21 amendatory Act of the 99th General Assembly, every health care
22 professional, except for those employed by a hospital or
23 hospital affiliate, as defined in the Hospital Licensing Act,
24 or those employed by a hospital operated under the University
25 of Illinois Hospital Act, who bills separately for medical or
26 forensic services must develop a billing protocol that ensures

1 that no survivor of sexual assault will be sent a bill for any
2 medical forensic services and submit the billing protocol to
3 the Office of the Attorney General for approval. Within 60
4 days after the commencement of the provision of medical
5 forensic services, every health care professional, except for
6 those employed by a hospital or hospital affiliate, as defined
7 in the Hospital Licensing Act, or those employed by a hospital
8 operated under the University of Illinois Hospital Act, who
9 bills separately for medical or forensic services must develop
10 a billing protocol that ensures that no survivor of sexual
11 assault is sent a bill for any medical forensic services and
12 submit the billing protocol to the Attorney General for
13 approval. Health care professionals who bill as a legal entity
14 may submit a single billing protocol for the billing entity.

15 Within 60 days after the Department's approval of a
16 treatment plan, an approved pediatric health care facility and
17 any health care professional employed by an approved pediatric
18 health care facility must develop a billing protocol that
19 ensures that no survivor of sexual assault is sent a bill for
20 any medical forensic services and submit the billing protocol
21 to the Office of the Attorney General for approval.

22 The billing protocol must include at a minimum:

23 (1) a description of training for persons who prepare
24 bills for medical and forensic services;

25 (2) a written acknowledgement signed by a person who
26 has completed the training that the person will not bill

1 survivors of sexual assault;

2 (3) prohibitions on submitting any bill for any
3 portion of medical forensic services provided to a
4 survivor of sexual assault to a collection agency;

5 (4) prohibitions on taking any action that would
6 adversely affect the credit of the survivor of sexual
7 assault;

8 (5) the termination of all collection activities if
9 the protocol is violated; and

10 (6) the actions to be taken if a bill is sent to a
11 collection agency or the failure to pay is reported to any
12 credit reporting agency.

13 The Office of the Attorney General may provide a sample
14 acceptable billing protocol upon request.

15 The Office of the Attorney General shall approve a
16 proposed protocol if it finds that the implementation of the
17 protocol would result in no survivor of sexual assault being
18 billed or sent a bill for medical forensic services.

19 If the Office of the Attorney General determines that
20 implementation of the protocol could result in the billing of
21 a survivor of sexual assault for medical forensic services,
22 the Office of the Attorney General shall provide the health
23 care professional or approved pediatric health care facility
24 with a written statement of the deficiencies in the protocol.
25 The health care professional or approved pediatric health care
26 facility shall have 30 days to submit a revised billing

1 protocol addressing the deficiencies to the Office of the
2 Attorney General. The health care professional or approved
3 pediatric health care facility shall implement the protocol
4 upon approval by the Office of the Attorney General.

5 The health care professional or approved pediatric health
6 care facility shall submit any proposed revision to or
7 modification of an approved billing protocol to the Office of
8 the Attorney General for approval. The health care
9 professional or approved pediatric health care facility shall
10 implement the revised or modified billing protocol upon
11 approval by the Office of the Illinois Attorney General.

12 (e) This Section is effective on and after January 1,
13 2024.

14 (Source: P.A. 101-634, eff. 6-5-20; 101-652, eff. 7-1-21;
15 102-22, eff. 6-25-21; 102-674, eff. 11-30-21.)

16 (410 ILCS 70/9.5)

17 (Section scheduled to be repealed on January 1, 2024)

18 Sec. 9.5. Sexual Assault Medical Forensic Services
19 Implementation Task Force.

20 (a) The Sexual Assault Medical Forensic Services
21 Implementation Task Force is created to assist hospitals and
22 approved pediatric health care facilities with the
23 implementation of the changes made by this amendatory Act of
24 the 100th General Assembly. The Task Force shall consist of
25 the following members, who shall serve without compensation:

1 (1) one member of the Senate appointed by the
2 President of the Senate, who may designate an alternate
3 member;

4 (2) one member of the Senate appointed by the Minority
5 Leader of the Senate, who may designate an alternate
6 member;

7 (3) one member of the House of Representatives
8 appointed by the Speaker of the House of Representatives,
9 who may designate an alternate member;

10 (4) one member of the House of Representatives
11 appointed by the Minority Leader of the House of
12 Representatives, who may designate an alternate member;

13 (5) two members representing the Office of the
14 Attorney General appointed by the Attorney General, one of
15 whom shall be the Sexual Assault Nurse Examiner
16 Coordinator for the State of Illinois;

17 (6) one member representing the Department of Public
18 Health appointed by the Director of Public Health;

19 (7) one member representing the Illinois State Police
20 appointed by the Director of the Illinois State Police;

21 (8) one member representing the Department of
22 Healthcare and Family Services appointed by the Director
23 of Healthcare and Family Services;

24 (9) six members representing hospitals appointed by
25 the head of a statewide organization representing the
26 interests of hospitals in Illinois, at least one of whom

1 shall represent small and rural hospitals and at least one
2 of these members shall represent urban hospitals;

3 (10) one member representing physicians appointed by
4 the head of a statewide organization representing the
5 interests of physicians in Illinois;

6 (11) one member representing emergency physicians
7 appointed by the head of a statewide organization
8 representing the interests of emergency physicians in
9 Illinois;

10 (12) two members representing child abuse
11 pediatricians appointed by the head of a statewide
12 organization representing the interests of child abuse
13 pediatricians in Illinois, at least one of whom shall
14 represent child abuse pediatricians providing medical
15 forensic services in rural locations and at least one of
16 whom shall represent child abuse pediatricians providing
17 medical forensic services in urban locations;

18 (13) one member representing nurses appointed by the
19 head of a statewide organization representing the
20 interests of nurses in Illinois;

21 (14) two members representing sexual assault nurse
22 examiners appointed by the head of a statewide
23 organization representing the interests of forensic nurses
24 in Illinois, at least one of whom shall represent
25 pediatric/adolescent sexual assault nurse examiners and at
26 least one of these members shall represent

1 adult/adolescent sexual assault nurse examiners;

2 (15) one member representing State's Attorneys
3 appointed by the head of a statewide organization
4 representing the interests of State's Attorneys in
5 Illinois;

6 (16) three members representing sexual assault
7 survivors appointed by the head of a statewide
8 organization representing the interests of sexual assault
9 survivors and rape crisis centers, at least one of whom
10 shall represent rural rape crisis centers and at least one
11 of whom shall represent urban rape crisis centers; ~~and~~

12 (17) one member representing children's advocacy
13 centers appointed by the head of a statewide organization
14 representing the interests of children's advocacy centers
15 in Illinois; ~~and-~~

16 (18) one member representing approved federally
17 qualified health centers appointed by the Director of
18 Public Health.

19 The members representing the Office of the Attorney
20 General and the Department of Public Health shall serve as
21 co-chairpersons of the Task Force. The Office of the Attorney
22 General shall provide administrative and other support to the
23 Task Force.

24 (b) The first meeting of the Task Force shall be called by
25 the co-chairpersons no later than 90 days after the effective
26 date of this Section.

1 (c) The goals of the Task Force shall include, but not be
2 limited to, the following:

3 (1) to facilitate the development of areawide
4 treatment plans among hospitals and pediatric health care
5 facilities;

6 (2) to facilitate the development of on-call systems
7 of qualified medical providers and assist hospitals with
8 the development of plans to employ or contract with a
9 qualified medical provider to initiate medical forensic
10 services to a sexual assault survivor within 90 minutes of
11 the patient presenting to the hospital as required in
12 subsection (a-7) of Section 5;

13 (3) to identify photography and storage options for
14 hospitals to comply with the photo documentation
15 requirements in Sections 5 and 5.1;

16 (4) to develop a model written agreement for use by
17 rape crisis centers, hospitals, and approved pediatric
18 health care facilities with sexual assault treatment plans
19 to comply with subsection (c) of Section 2;

20 (5) to develop and distribute educational information
21 regarding the implementation of this Act to hospitals,
22 health care providers, rape crisis centers, children's
23 advocacy centers, State's Attorney's offices;

24 (6) to examine the role of telemedicine in the
25 provision of medical forensic services under this Act and
26 to develop recommendations for statutory change and

1 standards and procedures for the use of telemedicine to be
2 adopted by the Department;

3 (7) to seek inclusion of the International Association
4 of Forensic Nurses Sexual Assault Nurse Examiner Education
5 Guidelines for nurses within the registered nurse training
6 curriculum in Illinois nursing programs and the American
7 College of Emergency Physicians Management of the Patient
8 with the Complaint of Sexual Assault for emergency
9 physicians within the Illinois residency training
10 curriculum for emergency physicians; and

11 (8) to submit a report to the General Assembly by
12 January 1, 2024 ~~2023~~ regarding the status of
13 implementation of this amendatory Act of the 100th General
14 Assembly, including, but not limited to, the impact of
15 transfers to out-of-state hospitals on sexual assault
16 survivors and the availability of treatment hospitals in
17 Illinois. The report shall also cover the impact of
18 medical forensic services provided at approved federally
19 qualified health centers on sexual assault survivors. The
20 ~~the~~ report to the General Assembly shall be filed with the
21 Clerk of the House of Representatives and the Secretary of
22 the Senate in electronic form only, in the manner that the
23 Clerk and the Secretary shall direct.

24 (d) This Section is repealed on January 1, 2025 ~~2024~~.

25 (Source: P.A. 102-538, eff. 8-20-21.)