



Rep. Kelly M. Cassidy

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LRB103 04167 LNS 73481 a

1 AMENDMENT TO HOUSE BILL 582

2 AMENDMENT NO. _____. Amend House Bill 582 by replacing
3 everything after the enacting clause with the following:

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

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

8 Sec. 1a. Definitions.

9 (a) In this Act:

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

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

16 "Approved pediatric health care facility" means a health

1 care facility, other than a hospital, with a sexual assault
2 treatment plan approved by the Department to provide medical
3 forensic services to sexual assault survivors under the age of
4 18 who present with a complaint of sexual assault within a
5 minimum of the last 7 days or who have disclosed past sexual
6 assault by a specific individual and were in the care of that
7 individual within a minimum of the last 7 days.

8 "Areawide sexual assault treatment plan" means a plan,
9 developed by hospitals or by hospitals and approved pediatric
10 health care facilities in a community or area to be served,
11 which 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 "Follow-up healthcare" means healthcare services related
2 to a sexual assault, including laboratory services and
3 pharmacy services, rendered within 180 days of the initial
4 visit for medical forensic services.

5 "Health care professional" means a physician, a physician
6 assistant, a sexual assault forensic examiner, an advanced
7 practice registered nurse, a registered professional nurse, a
8 licensed practical nurse, or a sexual assault nurse examiner.

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

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

22 "Law enforcement agency having jurisdiction" means the law
23 enforcement agency in the jurisdiction where an alleged sexual
24 assault or sexual abuse occurred.

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

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

17 "Pediatric health care facility" means a clinic or
18 physician's office that provides medical services to patients
19 under the age of 18.

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

24 "Photo documentation" means digital photographs or
25 colposcope videos stored and backed up securely in the
26 original file format.

1 "Physician" means a person licensed to practice medicine
2 in all its branches.

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

5 "Prepubescent sexual assault survivor" means a female who
6 is under the age of 18 years and has not had a first menstrual
7 cycle or a male who is under the age of 18 years and has not
8 started to develop secondary sex characteristics who presents
9 for medical forensic services in relation to injuries or
10 trauma resulting from a sexual assault.

11 "Qualified medical provider" means a board-certified child
12 abuse pediatrician, board-eligible child abuse pediatrician, a
13 sexual assault forensic examiner, or a sexual assault nurse
14 examiner who has access to photo documentation tools, and who
15 participates in peer review.

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

18 "Sexual assault" means:

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

22 (2) any act of sexual penetration; as used in this
23 paragraph, "sexual penetration" has the meaning provided
24 under Section 11-0.1 of the Criminal Code of 2012 and
25 includes, without limitation, acts prohibited under
26 Sections 11-1.20 through 11-1.60 of the Criminal Code of

1 2012.

2 "Sexual assault forensic examiner" means a physician or
3 physician assistant who has completed training that meets or
4 is substantially similar to the Sexual Assault Nurse Examiner
5 Education Guidelines established by the International
6 Association of Forensic Nurses.

7 "Sexual assault nurse examiner" means an advanced practice
8 registered nurse or registered professional nurse who has
9 completed a sexual assault nurse examiner training program
10 that meets the Sexual Assault Nurse Examiner Education
11 Guidelines established by the International Association of
12 Forensic Nurses.

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

20 "Sexual assault survivor" means a person who presents for
21 medical forensic services in relation to injuries or trauma
22 resulting from a sexual assault.

23 "Sexual assault transfer plan" means a written plan
24 developed by a hospital and approved by the Department, which
25 describes the hospital's procedures for transferring sexual
26 assault survivors to another hospital, and an approved

1 pediatric health care facility, if applicable, in order to
2 receive medical forensic services.

3 "Sexual assault treatment plan" means a written plan that
4 describes the procedures and protocols for providing medical
5 forensic services to sexual assault survivors who present
6 themselves for such services, either directly or through
7 transfer from a hospital or an approved pediatric health care
8 facility.

9 "Transfer hospital" means a hospital with a sexual assault
10 transfer plan approved by the Department.

11 "Transfer services" means the appropriate medical
12 screening examination and necessary stabilizing treatment
13 prior to the transfer of a sexual assault survivor to a
14 hospital or an approved pediatric health care facility that
15 provides medical forensic services to sexual assault survivors
16 pursuant to a sexual assault treatment plan or areawide sexual
17 assault treatment plan.

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

25 "Treatment hospital with approved pediatric transfer"
26 means a hospital with a treatment plan approved by the

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

7 "Unduly burdensome" means a set of factors that create
8 significant hardship on a patient who must be transferred to
9 another hospital for treatment under this Act.

10 (b) This Section is effective on and after January 1,
11 2024.

12 (Source: P.A. 102-22, eff. 6-25-21; 102-538, eff. 8-20-21;
13 102-674, eff. 11-30-21; 102-813, eff. 5-13-22; 102-1097, eff.
14 1-1-23; 102-1106, eff. 1-1-23; 103-154, eff. 6-30-23.)

15 (410 ILCS 70/2) (from Ch. 111 1/2, par. 87-2)

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

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

1 assault survivors 13 years old or older, in accordance with
2 rules adopted by the Department.

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

25 (1) a treatment hospital with approved pediatric
26 transfer has agreed, as part of an areawide treatment

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

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

13 In determining whether a sexual assault transfer plan is
14 unduly burdensome under this subsection, the Department shall
15 consider the following factors:

16 (1) whether the travel distance to the transfer
17 hospital exceeds 60 miles for rural Critical Access
18 Hospitals and 40 miles for all other rural hospitals;

19 (2) the actual number of full-time equivalent staff
20 that are certified Sexual Assault Nurse Examiners;

21 (3) the number of patients who have presented to the
22 hospital emergency department with a presentation of
23 sexual assault within the previous 2 years;

24 (4) the age group ranges of patients (under age 13,
25 age 13 to 18, and age 18 and older) who presented for
26 treatment of sexual assault within the previous 2 years;

1 (5) the average daily, monthly, and annual number of
2 patients who presented and received emergency treatment in
3 the hospital's emergency department;

4 (6) the number of hospitals within a 60-mile radius in
5 which the hospital had considered an areawide transfer
6 agreement; and

7 (7) the existence of any areawide transfer agreements
8 or other arrangements to accommodate patients presenting
9 with sexual assault.

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

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

23 A transfer must be in accordance with federal and State
24 laws and local ordinances.

25 A treatment hospital with approved pediatric transfer must
26 submit an areawide treatment plan under Section 3 of this Act

1 that includes a written agreement with a treatment hospital
2 stating that the treatment hospital will provide medical
3 forensic services to pediatric sexual assault survivors
4 transferred from the treatment hospital with approved
5 pediatric transfer. The areawide treatment plan may also
6 include an approved pediatric health care facility.

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

1 under 13 years of age who are transferred from the transfer
2 hospital.

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

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

1 years. Protocols for training shall be included in the
2 hospital's sexual assault treatment plan.

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

6 (1) information provided on the provision of medical
7 forensic services;

8 (2) information on the use of the Illinois Sexual
9 Assault Evidence Collection Kit;

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

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

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

19 (a-5) A hospital must submit a plan to provide either (i)
20 transfer services to all sexual assault survivors, (ii)
21 medical forensic services to all sexual assault survivors, or
22 (iii) transfer services to pediatric sexual assault survivors
23 and medical forensic services to sexual assault survivors 13
24 years old or older as required in subsection (a) of this
25 Section within 60 days of the Department's request. Failure to
26 submit a plan as described in this subsection shall subject a

1 hospital to the imposition of a fine by the Department. The
2 Department may impose a fine of ~~up to~~ \$500 for submissions up
3 to 7 days late and \$2,500 for submissions 8 or more days late
4 ~~per day until the hospital submits a plan as described in this~~
5 ~~subsection.~~

6 (a-10) Upon receipt of a plan as described in subsection
7 (a-5), the Department shall notify the hospital whether or not
8 the plan is acceptable. If the Department determines that the
9 plan is unacceptable, the hospital must submit a modified plan
10 within 10 days of service of the notification. If the
11 Department determines that the modified plan is unacceptable,
12 or if the hospital fails to submit a modified plan within 10
13 days, the Department may impose a fine of ~~up to~~ \$500 for
14 submission up to 7 days late or an unacceptable plan and \$2,500
15 for submission 8 or more days late ~~per day until an acceptable~~
16 ~~plan has been submitted, as determined by the Department.~~

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

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

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

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

1 last 7 days until the Department has approved a treatment
2 plan.

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

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

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

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

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

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

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

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

1 sign.

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

5 (c) Each treatment hospital, treatment hospital with
6 approved pediatric transfer, and approved pediatric health
7 care facility must enter into a memorandum of understanding
8 with a rape crisis center for medical advocacy services, if
9 these services are available to the treatment hospital,
10 treatment hospital with approved pediatric transfer, or
11 approved pediatric health care facility. With the consent of
12 the sexual assault survivor, a rape crisis counselor shall
13 remain in the exam room during the collection for forensic
14 evidence.

15 (d) Every treatment hospital, treatment hospital with
16 approved pediatric transfer, and approved pediatric health
17 care facility's sexual assault treatment plan shall include
18 procedures for complying with mandatory reporting requirements
19 pursuant to (1) the Abused and Neglected Child Reporting Act;
20 (2) the Abused and Neglected Long Term Care Facility Residents
21 Reporting Act; (3) the Adult Protective Services Act; and (iv)
22 the Criminal Identification Act.

23 (e) Each treatment hospital, treatment hospital with
24 approved pediatric transfer, and approved pediatric health
25 care facility shall submit to the Department every 6 months,
26 in a manner prescribed by the Department, the following

1 information:

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

4 (2) The total number of Illinois Sexual Assault
5 Evidence Collection Kits:

6 (A) offered to (i) all sexual assault survivors
7 and (ii) pediatric sexual assault survivors pursuant
8 to paragraph (1.5) of subsection (a-5) of Section 5;

9 (B) completed for (i) all sexual assault survivors
10 and (ii) pediatric sexual assault survivors; and

11 (C) declined by (i) all sexual assault survivors
12 and (ii) pediatric sexual assault survivors.

13 This information shall be made available on the
14 Department's website.

15 (f) This Section is effective on and after January 1,
16 2024.

17 (Source: P.A. 101-73, eff. 7-12-19; 101-634, eff. 6-5-20;
18 102-22, eff. 6-25-21; 102-674, eff. 11-30-21; 102-1106, eff.
19 1-1-23.)

20 (410 ILCS 70/2.1) (from Ch. 111 1/2, par. 87-2.1)

21 Sec. 2.1. Plan of correction; penalties.

22 (a) If the Department surveyor determines that the
23 hospital or approved pediatric health care facility is not in
24 compliance with its approved plan and rules adopted under this
25 Act, the surveyor shall provide the hospital or approved

1 pediatric health care facility with a written warning of
2 violation and a statement of deficiencies listing the ~~list of~~
3 ~~the~~ specific items of noncompliance within 10 working days
4 after the conclusion of the on-site review. The hospital shall
5 have 10 working days to submit to the Department a plan of
6 correction which contains the hospital's or approved pediatric
7 health care facility's specific proposals for correcting the
8 items of noncompliance. The Department shall review the plan
9 of correction and notify the hospital in writing within 10
10 working days as to whether the plan is acceptable or
11 unacceptable.

12 If the Department finds the Plan of Correction
13 unacceptable, the hospital or approved pediatric health care
14 facility shall have 10 working days to resubmit an acceptable
15 Plan of Correction. Upon notification that its Plan of
16 Correction is acceptable, a hospital or approved pediatric
17 health care facility shall implement the Plan of Correction
18 within 60 days.

19 (b) The failure of a hospital to submit an acceptable Plan
20 of Correction or to implement the Plan of Correction, within
21 the time frames required in this Section, will subject a
22 hospital to the imposition of a \$500 fine by the Department.
23 ~~The Department may impose a fine of up to \$500 per day until a~~
24 ~~hospital complies with the requirements of this Section.~~ If a
25 hospital submits 2 Plans of Correction that are found to not be
26 acceptable by the Department, the hospital shall become

1 subject to the imposition of a \$2,500 fine by the Department.

2 If an approved pediatric health care facility fails to
3 submit an acceptable Plan of Correction or to implement the
4 Plan of Correction within the time frames required in this
5 Section, then the Department shall notify the approved
6 pediatric health care facility that the approved pediatric
7 health care facility may not provide medical forensic services
8 under this Act. The Department may impose a fine of up to \$500
9 per patient provided services in violation of this Act. If an
10 approved pediatric facility submits 2 Plans of Correction that
11 are found to not be acceptable by the Department, the approved
12 pediatric health care facility shall become subject to the
13 imposition of a fine by the Department and the termination of
14 its approved sexual assault treatment plan.

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

23 (c-5) The Department shall find a hospital in violation of
24 this subsection if, after the issuance of a written warning to
25 the hospital as described in subsection (a), the Department's
26 investigation finds that the hospital committed one or more of

1 the following violations:

2 (1) allowing a nonqualified medical provider to
3 perform and complete the medical forensic service
4 examination;

5 (2) refusing to offer a medical forensic service
6 examination to the sexual assault survivor;

7 (3) failing to provide medical management for sexually
8 transmitted infections, medical management for HIV, and
9 emergency contraception; or

10 (4) failing to offer photographic evidence, failing to
11 secure photographic evidence, or releasing photographic
12 evidence without a court order.

13 The Department shall impose a fine of \$3,000 for an
14 initial violation of this subsection and a fine of \$5,000 for
15 each subsequent violation.

16 (d) This Section is effective on and after January 1,
17 2024.

18 (Source: P.A. 101-81, eff. 7-12-19; 101-634, eff. 6-5-20;
19 102-22, eff. 6-25-21; 102-674, eff. 11-30-21; 102-1106, eff.
20 1-1-23.)".