

Sen. David Koehler

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Filed: 4/14/2023

	10300SB0333sam002 LRB103 26029 AWJ 60527 a
1	AMENDMENT TO SENATE BILL 333
2	AMENDMENT NO Amend Senate Bill 333 by replacing
3	everything after the enacting clause with the following:
4	"Section 5. The Criminal Identification Act is amended b
5	changing Section 3.2 as follows:
6	(20 ILCS 2630/3.2) (from Ch. 38, par. 206-3.2)
7	Sec. 3.2. (a) It is the duty of any person conducting o
8	operating a medical facility, or any physician or nurse $_{m{L}}$ a
9	soon as treatment permits, to notify the local law enforcemen
10	agency of that jurisdiction upon the application for treatmen
11	of a person who is not accompanied by a law enforcemen
12	officer, when it reasonably appears that the person requesting
13	treatment has received:
14	(1) any injury resulting from the discharge of
15	firearm; or

(2) any injury sustained in the commission of or as a

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victim of a criminal offense; or-

- (3) any injury sustained as a victim of a criminal offense. Except, when it reasonably appears that the person requesting treatment is a sexual assault survivor, a person conducting or operating a medical facility, or a physician or nurse at the medical facility, must notify the local law enforcement as follows:
 - (A) If a sexual <u>assault survivor consents to</u> notification being made, local law enforcement must be notified as soon as treatment permits. If the sexual assault or sexual abuse occurred in another jurisdiction, the law enforcement officer taking the report must submit the report to the law enforcement agency having jurisdiction as provided in subsection (c) of Section 20 of the Sexual Assault Incident Procedure Act.
 - (B) The healthcare provider must advise the survivor about the options for timing of the law enforcement notification, ask the survivor if the survivor has been threatened, and offer to connect the survivor with a rape crisis center for safety planning, if appropriate. If a sexual assault survivor does not consent to notification being made as soon as treatment permits, notification to the law enforcement agency having jurisdiction must be delayed until after the sexual assault survivor leaves the outpatient

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treatment location, but no later than 24 hours after the sexual assault survivor leaves. If the law enforcement agency having jurisdiction cannot be reasonably determined, then notification shall be made to the local law enforcement agency of the medical facility.

(C) If a sexual assault survivor does not consent to notification being made as soon as treatment permits and only consents to the collection and storage of evidence, the person conducting or operating a medical facility, or a physician or nurse at the medical facility, must make the notification in accordance with Section 6.6 or 6.6-1 of the Sexual Assault Survivors Emergency Treatment Act. Law enforcement may not be given any personal identifying information for the sexual assault survivor other than using the unique sexual assault evidence kit identification number assigned to the Illinois State Police evidence collection kit or the sexual assault survivor's medical record number. The medical facility, physician, or nurse must record the unique sexual assault evidence kit identification number in the medical record, if one exists, and shall provide the number to the sexual assault survivor or the sexual assault survivor's designee at the time of treatment and later at the request of the sexual

1	assault survivor or their designee.
2	(D) The sexual assault survivor's decision
3	regarding notification of law enforcement must be
4	documented in the medical record. The documentation
5	must also include confirmation that the question in
6	subparagraph (B) was asked of the survivor.
7	(E) The notification to law enforcement must be
8	limited to the following information:
9	(i) the date and time the sexual assault
10	survivor presented for treatment;
11	(ii) the nature of the criminal offense;
12	(iii) the municipality, township, or county
13	where the criminal offense occurred;
14	(iv) when necessary to prevent serious and
15	imminent physical harm to others, information that
16	identifies a perpetrator who poses a serious and
17	imminent threat to an identifiable group or
18	individual other than the victim;
19	(v) when applicable, the unique sexual assault
20	evidence kit identification number; and
21	(vi) additional information and details about
22	the criminal offense or the sexual assault
23	survivor that the sexual assault survivor gives
24	consent to be given, and this consent must be
25	documented in the medical record.
26	(F) Nothing in this subsection permits a delay in

1	notification to law enforcement when a patient admits
2	to committing a violent crime.
3	(G) Nothing in this subsection permits a delay in
4	notification to law enforcement when a sexual assault
5	survivor is admitted or treated for an injury due to
6	discharge of a firearm or life-threatening injuries.
7	Notification related to the sexual assault shall
8	otherwise meet the requirements of this subsection.
9	(H) Nothing in this subsection changes the
10	obligations of mandated reporters under the Abused and
11	Neglected Child Reporting Act, the Adult Protective
12	Services Act, and the Abused and Neglected Long Term
13	Care Facility Residents Reporting Act, and nothing in
14	this subsection requires a delay in notification of
15	law enforcement by the Department of Children and
16	Family Services, Adult Protective Services, or any
17	other agency receiving a mandated report.
18	Any hospital, physician or nurse shall be forever held
19	harmless from any civil liability for their reasonable
20	compliance with the provisions of this Section.
21	(b) Notwithstanding subsection (a), nothing in this
22	Section shall be construed to require the reporting of lawful
23	health care activity, whether such activity may constitute a
24	violation of another state's law.
25	(c) As used in this Section:

"Law enforcement agency having jurisdiction" and "sexual

- 1 <u>assault survivor</u>" have the meanings given to those terms in
- 2 Section 1a of the Sexual Assault Survivors Emergency Treatment
- 3 Act.

- "Lawful health care" means:
- (1) reproductive health care that is not unlawful under the laws of this State, including on any theory of vicarious, joint, several, or conspiracy liability; or
 - (2) the treatment of gender dysphoria or the affirmation of an individual's gender identity or gender expression, including but not limited to, all supplies, care, and services of a medical, behavioral health, mental health, surgical, psychiatric, therapeutic, diagnostic, preventative, rehabilitative, or supportive nature that is not unlawful under the laws of this State, including on any theory of vicarious, joint, several, or conspiracy liability.
 - "Lawful health care activity" means seeking, providing, receiving, assisting in seeking, providing, or receiving, providing material support for, or traveling to obtain lawful health care.
- 21 (Source: P.A. 102-1117, eff. 1-13-23.)".