



Sen. David Koehler

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LRB103 26029 AWJ 60862 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 by  
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 or  
8 operating a medical facility, or any physician or nurse, as  
9 soon as treatment permits, to notify the local law enforcement  
10 agency of that jurisdiction upon the application for treatment  
11 of a person who is not accompanied by a law enforcement  
12 officer, when it reasonably appears that the person requesting  
13 treatment has received:

14 (1) any injury resulting from the discharge of a  
15 firearm; ~~or~~

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

1 ~~victim of a criminal offense; or~~

2 (3) any injury sustained as a victim of a criminal  
3 offense. Except, when it reasonably appears that the  
4 person requesting treatment is a sexual assault survivor  
5 age 13 or older, a person conducting or operating a  
6 medical facility, or a physician or nurse at the medical  
7 facility, must notify the local law enforcement as  
8 follows:

9 (A) If a sexual assault survivor consents to  
10 notification being made, local law enforcement must be  
11 notified as soon as treatment permits. If the sexual  
12 assault or sexual abuse occurred in another  
13 jurisdiction, the law enforcement officer taking the  
14 report must submit the report to the law enforcement  
15 agency having jurisdiction as provided in subsection  
16 (c) of Section 20 of the Sexual Assault Incident  
17 Procedure Act.

18 (B) The health care provider must advise the  
19 survivor about the options for timing of the law  
20 enforcement notification, ask the survivor if the  
21 survivor has been threatened, and offer to connect the  
22 survivor with a rape crisis center for safety  
23 planning, if appropriate. If a sexual assault survivor  
24 does not consent to notification being made as soon as  
25 treatment permits, notification to the law enforcement  
26 agency having jurisdiction must be delayed until after

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

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

1 treatment and later at the request of the sexual  
2 assault survivor or their designee.

3 (D) The sexual assault survivor's decision  
4 regarding notification of law enforcement must be  
5 documented in the medical record. The documentation  
6 must also include confirmation that the question in  
7 subparagraph (B) was asked of the survivor.

8 (E) The notification to law enforcement must be  
9 limited to the following information:

10 (i) the date and time the sexual assault  
11 survivor presented for treatment;

12 (ii) the nature of the criminal offense;

13 (iii) the municipality, township, or county  
14 where the criminal offense occurred;

15 (iv) when necessary to prevent serious and  
16 imminent physical harm to others, information that  
17 identifies a perpetrator who poses a serious and  
18 imminent threat to an identifiable group or  
19 individual other than the victim;

20 (v) when applicable, the unique sexual assault  
21 evidence kit identification number; and

22 (vi) additional information and details about  
23 the criminal offense or the sexual assault  
24 survivor that the sexual assault survivor gives  
25 consent to be given, and this consent must be  
26 documented in the medical record.

1           (F) Nothing in this subsection permits a delay in  
2           notification to law enforcement when a patient admits  
3           to committing a violent crime.

4           (G) Nothing in this subsection permits a delay in  
5           notification to law enforcement when a sexual assault  
6           survivor is admitted or treated for an injury due to  
7           discharge of a firearm or life-threatening injuries.  
8           Notification related to the sexual assault shall  
9           otherwise meet the requirements of this subsection.

10           (H) Nothing in this subsection changes the  
11           obligations of mandated reporters under the Abused and  
12           Neglected Child Reporting Act, the Adult Protective  
13           Services Act, and the Abused and Neglected Long Term  
14           Care Facility Residents Reporting Act, and nothing in  
15           this subsection requires a delay in notification of  
16           law enforcement by the Department of Children and  
17           Family Services, Adult Protective Services, or any  
18           other agency receiving a mandated report.

19           Any hospital, physician or nurse shall be forever held  
20           harmless from any civil liability for their reasonable  
21           compliance with the provisions of this Section.

22           (b) Notwithstanding subsection (a), nothing in this  
23           Section shall be construed to require the reporting of lawful  
24           health care activity, whether such activity may constitute a  
25           violation of another state's law.

26           (c) As used in this Section:

1       "Law enforcement agency having jurisdiction" and "sexual  
2 assault survivor" have the meanings given to those terms in  
3 Section 1a of the Sexual Assault Survivors Emergency Treatment  
4 Act.

5       "Lawful health care" means:

6           (1) reproductive health care that is not unlawful  
7       under the laws of this State, including on any theory of  
8       vicarious, joint, several, or conspiracy liability; or

9           (2) the treatment of gender dysphoria or the  
10       affirmation of an individual's gender identity or gender  
11       expression, including but not limited to, all supplies,  
12       care, and services of a medical, behavioral health, mental  
13       health, surgical, psychiatric, therapeutic, diagnostic,  
14       preventative, rehabilitative, or supportive nature that is  
15       not unlawful under the laws of this State, including on  
16       any theory of vicarious, joint, several, or conspiracy  
17       liability.

18       "Lawful health care activity" means seeking, providing,  
19       receiving, assisting in seeking, providing, or receiving,  
20       providing material support for, or traveling to obtain lawful  
21       health care.

22       (Source: P.A. 102-1117, eff. 1-13-23.)".