

1 AN ACT concerning public health.

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

4 Section 5. The Department of Professional Regulation Law of
5 the Civil Administrative Code of Illinois is amended by adding
6 Section 2105-400 as follows:

7 (20 ILCS 2105/2105-400 new)

8 Sec. 2105-400. Emergency Powers.

9 (a) Upon proclamation of a disaster by the Governor, as
10 provided for in the Illinois Emergency Management Agency Act,
11 the Director of Professional Regulation shall have the
12 following powers, which shall be exercised only in coordination
13 with the Illinois Emergency Management Agency and the
14 Department of Public Health:

15 (1) The power to suspend the requirements for permanent
16 or temporary licensure of persons who are licensed in
17 another state and are working under the direction of the
18 Illinois Emergency Management Agency and the Department of
19 Public Health pursuant to a declared disaster.

20 (2) The power to modify the scope of practice
21 restrictions under any licensing act administered by the
22 Department for any person working under the direction of
23 the Illinois Emergency Management Agency and the Illinois
24 Department of Public Health pursuant to the declared
25 disaster.

26 (3) The power to expand the exemption in Section 4(a)
27 of the Pharmacy Practice Act of 1987 to those licensed
28 professionals whose scope of practice has been modified,
29 under paragraph (2) of subsection (a) of this Section, to
30 include any element of the practice of pharmacy as defined
31 in the Pharmacy Practice Act of 1987 for any person working
32 under the direction of the Illinois Emergency Management

1 Agency and the Illinois Department of Public Health
2 pursuant to the declared disaster.

3 (b) Persons exempt from licensure under paragraph (1) of
4 subsection (a) of this Section and persons operating under
5 modified scope of practice provisions under paragraph (2) of
6 subsection (a) of this Section shall be exempt from licensure
7 or be subject to modified scope of practice only until the
8 declared disaster has ended as provided by law.

9 (c) The Director shall exercise these powers by way of
10 proclamation.

11 Section 10. The Department of Public Health Act is amended
12 by changing Sections 2 and 7 and by adding Section 2.1 as
13 follows:

14 (20 ILCS 2305/2) (from Ch. 111 1/2, par. 22)

15 Sec. 2. Powers.

16 (a) The State Department of Public Health has general
17 supervision of the interests of the health and lives of the
18 people of the State. It has supreme authority in matters of
19 quarantine and isolation, and may declare and enforce
20 quarantine and isolation when none exists, and may modify or
21 relax quarantine and isolation when it has been established.
22 The Department may adopt, promulgate, repeal and amend rules
23 and regulations and make such sanitary investigations and
24 inspections as it may from time to time deem necessary for the
25 preservation and improvement of the public health, consistent
26 with law regulating the following:

27 (1) Transportation of the remains of deceased persons.

28 (2) Sanitary practices relating to drinking water made
29 accessible to the public for human consumption or for
30 lavatory or culinary purposes.

31 (3) Sanitary practices relating to rest room
32 facilities made accessible to the public or to persons
33 handling food served to the public.

34 (4) Sanitary practices relating to disposal of human

1 wastes in or from all buildings and places where people
2 live, work or assemble.

3 The provisions of the Illinois Administrative Procedure
4 Act are hereby expressly adopted and shall apply to all
5 administrative rules and procedures of the Department of Public
6 Health under this Act, except that Section 5-35 of the Illinois
7 Administrative Procedure Act relating to procedures for
8 rule-making does not apply to the adoption of any rule required
9 by federal law in connection with which the Department is
10 precluded by law from exercising any discretion.

11 All local boards of health, health authorities and
12 officers, police officers, sheriffs and all other officers and
13 employees of the state or any locality shall enforce the rules
14 and regulations so adopted and orders issued by the Department
15 pursuant to this Section.

16 The Department of Public Health shall conduct a public
17 information campaign to inform Hispanic women of the high
18 incidence of breast cancer and the importance of mammograms and
19 where to obtain a mammogram. This requirement may be satisfied
20 by translation into Spanish and distribution of the breast
21 cancer summaries required by Section 2310-345 of the Department
22 of Public Health Powers and Duties Law (20 ILCS 2310/2310-345).
23 The information provided by the Department of Public Health
24 shall include (i) a statement that mammography is the most
25 accurate method for making an early detection of breast cancer,
26 however, no diagnostic tool is 100% effective and (ii)
27 instructions for performing breast self-examination and a
28 statement that it is important to perform a breast
29 self-examination monthly.

30 The Department of Public Health shall investigate the
31 causes of dangerously contagious or infectious diseases,
32 especially when existing in epidemic form, and take means to
33 restrict and suppress the same, and whenever such disease
34 becomes, or threatens to become epidemic, in any locality and
35 the local board of health or local authorities neglect or
36 refuse to enforce efficient measures for its restriction or

1 suppression or to act with sufficient promptness or efficiency,
2 or whenever the local board of health or local authorities
3 neglect or refuse to promptly enforce efficient measures for
4 the restriction or suppression of dangerously contagious or
5 infectious diseases, the Department of Public Health may
6 enforce such measures as it deems necessary to protect the
7 public health, and all necessary expenses so incurred shall be
8 paid by the locality for which services are rendered.

9 (b) Subject to the provisions of subsection (c), the
10 Department may order a person or group of persons to be
11 quarantined or isolated or may order a place to be closed and
12 made off limits to the public to prevent the probable spread of
13 a dangerously contagious or infectious disease, including
14 non-compliant tuberculosis patients, until such time as the
15 condition can be corrected or the danger to the public health
16 eliminated or reduced in such a manner that no substantial
17 danger to the public's health any longer exists. Orders for
18 isolation of a person or quarantine of a place to prevent the
19 probable spread of a sexually transmissible disease shall be
20 governed by the provisions of Section 7 of the Illinois
21 Sexually Transmissible Disease Control Act and not this
22 Section.

23 (c) Except as provided in this Section, no person or a
24 group of persons may be ordered to be quarantined or isolated
25 and no place may be ordered to be closed and made off limits to
26 the public except with the consent of the person or owner of
27 the place or upon the prior order of a court of competent
28 jurisdiction. The Department may, however, order a person or a
29 group of persons to be quarantined or isolated or may order a
30 place to be closed and made off limits to the public on an
31 immediate basis without prior consent or court order if, in the
32 reasonable judgment of the Department, immediate action is
33 required to protect the public from a dangerously contagious or
34 infectious disease. In the event of an immediate order issued
35 without prior consent or court order, the Department shall, as
36 soon as practical, within 48 hours after issuing the order,

1 obtain the consent of the person or owner or file a petition
2 requesting a court order authorizing the isolation or
3 quarantine or closure. When exigent circumstances exist that
4 cause the court system to be unavailable or that make it
5 impossible to obtain consent or file a petition within 48 hours
6 after issuance of an immediate order, the Department must
7 obtain consent or file a petition requesting a court order as
8 soon as reasonably possible. To obtain a court order, the
9 Department, by clear and convincing evidence, must prove that
10 the public's health and welfare are significantly endangered by
11 a person or group of persons that has, that is suspected of
12 having, that has been exposed to, or that is reasonably
13 believed to have been exposed to ~~with~~ a dangerously contagious
14 or infectious disease including non-compliant tuberculosis
15 patients or by a place where there is a significant amount of
16 activity likely to spread a dangerously contagious or
17 infectious disease. The Department must also prove that all
18 other reasonable means of correcting the problem have been
19 exhausted and no less restrictive alternative exists. For
20 purposes of this subsection, in determining whether no less
21 restrictive alternative exists, the court shall consider
22 evidence showing that, under the circumstances presented by the
23 case in which an order is sought, quarantine or isolation is
24 the measure provided for in a rule of the Department or in
25 guidelines issued by the Centers for Disease Control and
26 Prevention or the World Health Organization. Persons who are or
27 are about to be ordered to be isolated or quarantined and
28 owners of places that are or are about to be closed and made
29 off limits to the public shall have the right to counsel. If a
30 person or owner is indigent, the court shall appoint counsel
31 for that person or owner. Persons who are ordered to be
32 isolated or quarantined or who are owners of places that are
33 ordered to be closed and made off limits to the public, shall
34 be given a written notice of such order. The written notice
35 shall additionally include the following: (1) notice of the
36 right to counsel; (2) notice that if the person or owner is

1 indigent, the court will appoint counsel for that person or
2 owner; (3) notice of the reason for the order for isolation,
3 quarantine, or closure; (4) notice of whether the order is an
4 immediate order, and if so, the time frame for the Department
5 to seek consent or to file a petition requesting a court order
6 as set out in this subsection; and (5) notice of the
7 anticipated duration of the isolation, quarantine, or closure.

8 (d) The Department may order physical examinations and
9 tests and collect laboratory specimens as necessary for the
10 diagnosis or treatment of individuals in order to prevent the
11 probable spread of a dangerously contagious or infectious
12 disease. Physical examinations, tests, or collection of
13 laboratory specimens must not be such as are reasonably likely
14 to lead to serious harm to the affected individual. To prevent
15 the spread of a dangerously contagious or infectious disease,
16 the Department may, pursuant to the provisions of subsection
17 (c) of this Section, isolate or quarantine any person whose
18 refusal of physical examination or testing or collection of
19 laboratory specimens results in uncertainty regarding whether
20 he or she has been exposed to or is infected with a dangerously
21 contagious or infectious disease or otherwise poses a danger to
22 the public's health. An individual may refuse to consent to a
23 physical examination, test, or collection of laboratory
24 specimens. An individual shall be given a written notice that
25 shall include notice of the following: (i) that the individual
26 may refuse to consent to physical examination, test, or
27 collection of laboratory specimens; (ii) that if the individual
28 consents to physical examination, tests, or collection of
29 laboratory specimens, the results of that examination, test, or
30 collection of laboratory specimens may subject the individual
31 to isolation or quarantine pursuant to the provisions of
32 subsection (c) of this Section; (iii) that if the individual
33 refuses to consent to physical examination, tests, or
34 collection of laboratory specimens and that refusal results in
35 uncertainty regarding whether he or she has been exposed to or
36 is infected with a dangerously contagious or infectious disease

1 or otherwise poses a danger to the public's health, the
2 individual may be subject to isolation or quarantine pursuant
3 to the provisions of subsection (c) of this Section; and (iv)
4 that if the individual refuses to consent to physical
5 examinations, tests, or collection of laboratory specimens and
6 becomes subject to isolation and quarantine as provided in this
7 subsection (d), he or she shall have the right to counsel
8 pursuant to the provisions of subsection (c) of this Section.
9 To the extent feasible without endangering the public's health,
10 the Department shall respect and accommodate the religious
11 beliefs of individuals in implementing this subsection.

12 (e) The Department may order the administration of
13 vaccines, medications, or other treatments to persons as
14 necessary in order to prevent the probable spread of a
15 dangerously contagious or infectious disease. A vaccine,
16 medication, or other treatment to be administered must not be
17 such as is reasonably likely to lead to serious harm to the
18 affected individual. To prevent the spread of a dangerously
19 contagious or infectious disease, the Department may, pursuant
20 to the provisions of subsection (c) of this Section, isolate or
21 quarantine persons who are unable or unwilling to receive
22 vaccines, medications, or other treatments pursuant to this
23 Section. An individual may refuse to receive vaccines,
24 medications, or other treatments. An individual shall be given
25 a written notice that shall include notice of the following:
26 (i) that the individual may refuse to consent to vaccines,
27 medications, or other treatments; (ii) that if the individual
28 refuses to receive vaccines, medications, or other treatments,
29 the individual may be subject to isolation or quarantine
30 pursuant to the provisions of subsection (c) of this Section;
31 and (iii) that if the individual refuses to receive vaccines,
32 medications, or other treatments and becomes subject to
33 isolation or quarantine as provided in this subsection (e), he
34 or she shall have the right to counsel pursuant to the
35 provisions of subsection (c) of this Section. To the extent
36 feasible without endangering the public's health, the

1 Department shall respect and accommodate the religious beliefs
2 of individuals in implementing this subsection.

3 (f) The Department may order observation and monitoring of
4 persons to prevent the probable spread of a dangerously
5 contagious or infectious disease. To prevent the spread of a
6 dangerously contagious or infectious disease, the Department
7 may, pursuant to the provisions of subsection (c) of this
8 Section, isolate or quarantine persons whose refusal to undergo
9 observation and monitoring results in uncertainty regarding
10 whether he or she has been exposed to or is infected with a
11 dangerously contagious or infectious disease or otherwise
12 poses a danger to the public's health. An individual may refuse
13 to undergo observation and monitoring. An individual shall be
14 given written notice that shall include notice of the
15 following: (i) that the individual may refuse to undergo
16 observation and monitoring; (ii) that if the individual
17 consents to observation and monitoring, the results of that
18 observation and monitoring may subject the individual to
19 isolation or quarantine pursuant to the provisions of
20 subsection (c) of this Section; (iii) that if the individual
21 refuses to undergo observation and monitoring and that refusal
22 results in uncertainty regarding whether he or she has been
23 exposed to or is infected with a dangerously contagious or
24 infectious disease or otherwise poses a danger to the public's
25 health, the individual may be subject to isolation or
26 quarantine pursuant to the provisions of subsection (c) of this
27 Section; and (iv) that if the individual refuses to undergo
28 observation and monitoring and becomes subject to isolation or
29 quarantine as provided in this subsection (f), he or she shall
30 have the right to counsel pursuant to the provisions of
31 subsection (c) of this Section.

32 (g) To prevent the spread of a dangerously contagious or
33 infectious disease among humans, the Department may examine,
34 test, disinfect, seize, or destroy animals or other related
35 property believed to be sources of infection. An owner of such
36 animal or other related property shall be given written notice

1 regarding such examination, testing, disinfection, seizure, or
2 destruction. When the Department determines that any animal or
3 related property is infected with or has been exposed to a
4 dangerously contagious or infectious disease, it may agree with
5 the owner upon the value of the animal or of any related
6 property that it may be found necessary to destroy, and in case
7 such an agreement cannot be made, the animals or related
8 property shall be appraised by 3 competent and disinterested
9 appraisers, one to be selected by the Department, one by the
10 claimant, and one by the 2 appraisers thus selected. The
11 appraisers shall subscribe to an oath made in writing to fairly
12 value the animals or related property in accordance with the
13 requirements of this Act. The oath, together with the valuation
14 fixed by the appraisers, shall be filed with the Department and
15 preserved by it. Upon the appraisal being made, the owner or
16 the Department shall immediately destroy the animals by "humane
17 euthanasia" as that term is defined in Section 2.09 of the
18 Humane Care for Animals Act. Dogs and cats, however, shall be
19 euthanized pursuant to the provisions of the Humane Euthanasia
20 in Animal Shelters Act. The owner or the Department shall
21 additionally, dispose of the carcasses, and disinfect, change,
22 or destroy the premises occupied by the animals, in accordance
23 with rules prescribed by the Department governing such
24 destruction and disinfection. Upon his or her failure so to do
25 or to cooperate with the Department, the Department shall cause
26 the animals or related property to be destroyed and disposed of
27 in the same manner, and thereupon the owner shall forfeit all
28 right to receive any compensation for the destruction of the
29 animals or related property. All final administrative
30 decisions of the Department hereunder shall be subject to
31 judicial review pursuant to the provisions of the
32 Administrative Review Law, and all amendments and
33 modifications thereof, and the rules adopted pursuant thereto.
34 The term "administrative decision" is defined as in Section
35 3-101 of the Code of Civil Procedure.

36 (h) To prevent the spread of a dangerously contagious or

1 infectious disease, the Department, local boards of health, and
2 local public health authorities shall have emergency access to
3 medical or health information or records or data upon the
4 condition that the Department, local boards of health, and
5 local public health authorities shall protect the privacy and
6 confidentiality of any medical or health information or records
7 or data obtained pursuant to this Section in accordance with
8 federal and State law. Additionally, any such medical or health
9 information or records or data shall be exempt from inspection
10 and copying under the Freedom of Information Act. Other than a
11 hearing for the purpose of this Act, any information, records,
12 reports, statements, notes, memoranda, or other data in the
13 possession of the Department, local boards of health, or local
14 public health authorities shall not be admissible as evidence,
15 nor discoverable in any action of any kind in any court or
16 before any tribunal, board, agency, or person. The access to or
17 disclosure of any of this information or data by the
18 Department, a local board of health, or a local public
19 authority shall not waive or have any effect upon its
20 non-discoverability or non-admissibility. Any person,
21 facility, institution, or agency that provides emergency
22 access to health information and data under this subsection
23 shall have immunity from any civil or criminal liability, or
24 any other type of liability that might otherwise result by
25 reason of these actions except in the event of willful and
26 wanton misconduct. The privileged quality of communication
27 between any professional person or any facility shall not
28 constitute grounds for failure to provide emergency access.
29 Nothing in this subsection shall prohibit the sharing of
30 information as authorized in Section 2.1 of this Act. The
31 disclosure of any of this information, records, reports,
32 statements, notes, memoranda, or other data obtained in any
33 activity under this Act, except that necessary for the purposes
34 of this Act, is unlawful, and any person convicted of violating
35 this provision is guilty of a Class A misdemeanor.

36 (i) (A) The Department, in order to prevent and control

1 disease, injury, or disability among citizens of the State
2 of Illinois, may develop and implement, in consultation
3 with local public health authorities, a Statewide system
4 for syndromic data collection through the access to
5 interoperable networks, information exchanges, and
6 databases. The Department may also develop a system for the
7 reporting of comprehensive, integrated data to identify
8 and address unusual occurrences of disease symptoms and
9 other medical complexes affecting the public's health.

10 (B) The Department may enter into contracts or
11 agreements with individuals, corporations, hospitals,
12 universities, not-for-profit corporations, governmental
13 entities, or other organizations, whereby those
14 individuals or entities agree to provide assistance in the
15 compilation of the syndromic data collection and reporting
16 system.

17 (C) The Department shall not release any syndromic data
18 or information obtained pursuant to this subsection to any
19 individuals or entities for purposes other than the
20 protection of the public health. All access to data by the
21 Department, reports made to the Department, the identity of
22 or facts that would tend to lead to the identity of the
23 individual who is the subject of the report, and the
24 identity of or facts that would tend to lead to the
25 identity of the author of the report shall be strictly
26 confidential, are not subject to inspection or
27 dissemination, and shall be used only for public health
28 purposes by the Department, local public health
29 authorities, or the Centers for Disease Control and
30 Prevention. Entities or individuals submitting reports or
31 providing access to the Department shall not be held liable
32 for the release of information or confidential data to the
33 Department in accordance with this subsection.

34 (D) Nothing in this subsection prohibits the sharing of
35 information as authorized in Section 2.1 of this Act.

36 (j) ~~(d)~~ This Section shall be considered supplemental to

1 the existing authority and powers of the Department and shall
2 not be construed to restrain or restrict the Department in
3 protecting the public health under any other provisions of the
4 law.

5 (k) ~~(e)~~ Any person who knowingly or maliciously
6 disseminates any false information or report concerning the
7 existence of any dangerously contagious or infectious disease
8 in connection with the Department's power of quarantine,
9 isolation and closure or refuses to comply with a quarantine,
10 isolation or closure order is guilty of a Class A misdemeanor.

11 (l) ~~(f)~~ The Department of Public Health may establish and
12 maintain a chemical and bacteriologic laboratory for the
13 examination of water and wastes, and for the diagnosis of
14 diphtheria, typhoid fever, tuberculosis, malarial fever and
15 such other diseases as it deems necessary for the protection of
16 the public health.

17 As used in this Act, "locality" means any governmental
18 agency which exercises power pertaining to public health in an
19 area less than the State.

20 The terms "sanitary investigations and inspections" and
21 "sanitary practices" as used in this Act shall not include or
22 apply to "Public Water Supplies" or "Sewage Works" as defined
23 in the Environmental Protection Act. The Department may adopt
24 rules that are reasonable and necessary to implement and
25 effectuate this amendatory Act of the 93rd General Assembly.

26 (Source: P.A. 91-239, eff. 1-1-00.)

27 (20 ILCS 2305/2.1 new)

28 Sec. 2.1. Information sharing.

29 (a) Whenever a State or local law enforcement authority
30 learns of a case of an illness, health condition, or unusual
31 disease or symptom cluster, reportable pursuant to rules
32 adopted by the Department or by a local board of health or
33 local public health authority, or a suspicious event that may
34 be the cause of or related to a public health emergency, as
35 that term is defined in Section 4 of the Illinois Emergency

1 Management Agency Act, it shall immediately notify the Illinois
2 Emergency Management Agency and the Department or local board
3 of health or local public health authority.

4 (b) Whenever the Department or a local board of health or
5 local public health authority learns of a case of an illness,
6 health condition, or unusual disease or symptom cluster,
7 reportable pursuant to rules adopted by the Department or by a
8 local board of health or a local public health authority, or a
9 suspicious event that it reasonably believes has the potential
10 to be the cause of or related to a public health emergency, as
11 that term is defined in Section 4 of the Illinois Emergency
12 Management Agency Act, it shall immediately notify the Illinois
13 Emergency Management Agency, the appropriate State and local
14 law enforcement authorities, other appropriate State agencies,
15 and federal health and law enforcement authorities and, after
16 that notification, it shall provide law enforcement
17 authorities with such other information as law enforcement
18 authorities may request for the purpose of conducting a
19 criminal investigation or a criminal prosecution of or arising
20 out of that matter. No information containing the identity or
21 tending to reveal the identity of any person may be redisclosed
22 by law enforcement, except in a prosecution of that person for
23 the commission of a crime.

24 (c) Sharing of information on reportable illnesses, health
25 conditions, unusual disease or symptom clusters, or suspicious
26 events between and among public health and law enforcement
27 authorities shall be restricted to the information necessary
28 for the treatment in response to, control of, investigation of,
29 and prevention of a public health emergency, as that term is
30 defined in Section 4 of the Illinois Emergency Management Act,
31 or for criminal investigation or criminal prosecution of or
32 arising out of that matter.

33 (d) The operation of the language of this Section is not
34 dependent upon a declaration of disaster by the Governor
35 pursuant to the Illinois Emergency Management Agency Act.

1 (20 ILCS 2305/7) (from Ch. 111 1/2, par. 22.05)

2 Sec. 7. The Illinois Department of Public Health shall
3 adopt rules requiring that upon death of a person who had or is
4 suspected of having an infectious or communicable disease that
5 could be transmitted through contact with the person's body or
6 bodily fluids, the body shall be labeled "Infection Hazard", or
7 with an equivalent term to inform persons having subsequent
8 contact with the body, including any funeral director or
9 embalmer, to take suitable precautions. Such rules shall
10 require that the label shall be prominently displayed on and
11 affixed to the outer wrapping or covering of the body if the
12 body is wrapped or covered in any manner. Responsibility for
13 such labeling shall lie with the attending physician who
14 certifies death, or if the death occurs in a health care
15 facility, with such staff member as may be designated by the
16 administrator of the facility. The Department may adopt rules
17 providing for the safe disposal of human remains. To the extent
18 feasible without endangering the public's health, the
19 Department shall respect and accommodate the religious beliefs
20 of individuals in implementing this Section.

21 (Source: P.A. 85-1209.)

22 Section 15. The Department of Public Health Powers and
23 Duties Law of the Civil Administrative Code of Illinois is
24 amended by changing Sections 2310-5, 2310-35, and 2310-50.5 and
25 by adding Sections 2310-610, 2310-615, 2310-620, and 2310-625
26 as follows:

27 (20 ILCS 2310/2310-5)

28 Sec. 2310-5. Definitions. In this Law:

29 "Department" means the Department of Public Health.

30 "Director" means the Director of Public Health.

31 "Public health emergency" has the meaning set forth in
32 Section 4 of the Illinois Emergency Management Agency Act.

33 (Source: P.A. 91-239, eff. 1-1-00.)

1 (20 ILCS 2310/2310-35) (was 20 ILCS 2310/55.27)

2 Sec. 2310-35. Federal monies; indirect cost
3 reimbursements. To accept, receive, and receipt for federal
4 monies, for and in behalf of the State, given by the federal
5 government under any federal law to the State for health
6 purposes, surveys, or programs, and to adopt necessary rules
7 pertaining thereto pursuant to the Illinois Administrative
8 Procedure Act. To deposit indirect cost reimbursements
9 received by the Department into the Public Health Special State
10 Projects Fund, and to expend those funds, subject to
11 appropriation, for public health purposes only.

12 (Source: P.A. 91-239, eff. 1-1-00.)

13 (20 ILCS 2310/2310-50.5)

14 Sec. 2310-50.5. Coordination concerning public health
15 emergencies. To coordinate with the Illinois Emergency
16 Management Agency with respect to planning for and responding
17 to public health emergencies, as defined in Section 4 of the
18 Illinois Emergency Management Agency Act. The Department shall
19 additionally cooperate with the Governor, other State agencies
20 and local authorities, including local public health
21 authorities, in the development of strategies and plans to
22 protect the public health in the event of a public health
23 emergency, as defined in Section 4 of the Illinois Emergency
24 Management Agency Act.

25 (Source: P.A. 93-249, eff. 7-22-03.)

26 (20 ILCS 2310/2310-610 new)

27 Sec. 2310-610. Rules; public health preparedness. The
28 Department shall adopt and implement rules, contact lists, and
29 response plans governing public health preparedness and
30 response.

31 (20 ILCS 2310/2310-615 new)

32 Sec. 2310-615. Department coordination; public health
33 preparedness. The Department shall require and coordinate

1 development and implementation of public health preparedness
2 and response plans by local health departments and facilities
3 licensed by the Department.

4 (20 ILCS 2310/2310-620 new)

5 Sec. 2310-620. Cooperation; public health preparedness.
6 The Department shall collaborate with relevant federal
7 government authorities, State agencies, local authorities,
8 including local public health authorities, elected officials
9 from other states, and private sector organizations on public
10 health preparedness and response.

11 (20 ILCS 2310/2310-625 new)

12 Sec. 2310-625. Emergency Powers.
13 (a) Upon proclamation of a disaster by the Governor, as
14 provided for in the Illinois Emergency Management Agency Act,
15 the Director of Public Health shall have the following powers,
16 which shall be exercised only in coordination with the Illinois
17 Emergency Management Agency and the Department of Professional
18 Regulation:

19 (1) The power to suspend the requirements for temporary
20 or permanent licensure or certification of persons who are
21 licensed or certified in another state and are working
22 under the direction of the Illinois Emergency Management
23 Agency and the Illinois Department of Public Health
24 pursuant to the declared disaster.

25 (2) The power to modify the scope of practice
26 restrictions under the Emergency Medical Services (EMS)
27 Systems Act for any persons who are licensed under that Act
28 for any person working under the direction of the Illinois
29 Emergency Management Agency and the Illinois Department of
30 Public Health pursuant to the declared disaster.

31 (3) The power to modify the scope of practice
32 restrictions under the Nursing Home Care Act for Certified
33 Nursing Assistants for any person working under the
34 direction of the Illinois Emergency Management Agency and

1 the Illinois Department of Public Health pursuant to the
2 declared disaster.

3 (b) Persons exempt from licensure or certification under
4 paragraph (1) of subsection (a) and persons operating under
5 modified scope of practice provisions under paragraph (2) of
6 subsection (a) and paragraph (3) of subsection (a) shall be
7 exempt from licensure or certification or subject to modified
8 scope of practice only until the declared disaster has ended as
9 provided by law.

10 (c) The Director shall exercise these powers by way of
11 proclamation.

12 Section 20. The Illinois Clinical Laboratory and Blood Bank
13 Act is amended by changing Section 7-102 as follows:

14 (210 ILCS 25/7-102) (from Ch. 111 1/2, par. 627-102)

15 Sec. 7-102. Reports of test results. The result of a test
16 shall be reported directly to the licensed physician or other
17 authorized person who requested it. No interpretation,
18 diagnosis or prognosis or suggested treatment shall appear on
19 the laboratory report form except that a report made by a
20 physician licensed to practice medicine in Illinois, a dentist
21 licensed in Illinois, or a therapeutic optometrist may include
22 such information. Nothing in this Act prohibits the sharing of
23 information as authorized in Section 2.1 of the Department of
24 Public Health Act.

25 (Source: P.A. 90-322, eff. 1-1-98.)

26 Section 25. The Emergency Medical Services (EMS) Systems
27 Act is amended by adding Section 3.255 as follows:

28 (210 ILCS 50/3.255 new)

29 Sec. 3.255. Emergency Medical Disaster Plan. The
30 Department shall develop and implement an Emergency Medical
31 Disaster Plan to assist emergency medical services personnel
32 and health care facilities in working together in a

1 collaborative way and to provide support in situations where
2 local medical resources are overwhelmed, including but not
3 limited to public health emergencies, as that term is defined
4 in Section 4 of the Illinois Emergency Management Agency Act.
5 As part of the plan, the Department may designate lead
6 hospitals in each Emergency Medical Services region
7 established under this Act and may foster the creation and
8 coordination of volunteer medical response teams that can be
9 deployed to assist when a locality's capacity is overwhelmed.
10 In developing an Emergency Medical Disaster Plan, the
11 Department shall collaborate with the entities listed in
12 Sections 2310-50.5 and 2310-620 of the Department of Public
13 Health Powers and Duties Law of the Civil Administrative Code
14 of Illinois.

15 Section 30. The Hospital Licensing Act is amended by
16 changing Section 10.4 as follows:

17 (210 ILCS 85/10.4) (from Ch. 111 1/2, par. 151.4)

18 Sec. 10.4. Medical staff privileges.

19 (a) Any hospital licensed under this Act or any hospital
20 organized under the University of Illinois Hospital Act shall,
21 prior to the granting of any medical staff privileges to an
22 applicant, or renewing a current medical staff member's
23 privileges, request of the Director of Professional Regulation
24 information concerning the licensure status and any
25 disciplinary action taken against the applicant's or medical
26 staff member's license, except: (1) for medical personnel who
27 enter a hospital to obtain organs and tissues for transplant
28 from a deceased donor in accordance with the Uniform Anatomical
29 Gift Act; or (2) for medical personnel who have been granted
30 disaster privileges pursuant to the procedures and
31 requirements established by rules adopted by the Department.
32 Any hospital and any employees of the hospital or others
33 involved in granting privileges that, in good faith, grants
34 disaster privileges pursuant to this Section to respond to an

1 emergency shall not, as a result of his, her, or its acts or
2 omissions, be liable for civil damages for granting or denying
3 disaster privileges except in the event of willful and wanton
4 misconduct, as that term is defined in Section 10.2 of this
5 Act. Individuals granted privileges who provide care in an
6 emergency situation, in good faith and without direct
7 compensation, shall not, as a result of his or her acts or
8 omissions, except for acts or omissions involving willful and
9 wanton misconduct, as that term is defined in Section 10.2 of
10 this Act, on the part of the person, be liable for civil
11 damages. The Director of Professional Regulation shall
12 transmit, in writing and in a timely fashion, such information
13 regarding the license of the applicant or the medical staff
14 member, including the record of imposition of any periods of
15 supervision or monitoring as a result of alcohol or substance
16 abuse, as provided by Section 23 of the Medical Practice Act of
17 1987, and such information as may have been submitted to the
18 Department indicating that the application or medical staff
19 member has been denied, or has surrendered, medical staff
20 privileges at a hospital licensed under this Act, or any
21 equivalent facility in another state or territory of the United
22 States. The Director of Professional Regulation shall define by
23 rule the period for timely response to such requests.

24 No transmittal of information by the Director of
25 Professional Regulation, under this Section shall be to other
26 than the president, chief operating officer, chief
27 administrative officer, or chief of the medical staff of a
28 hospital licensed under this Act, a hospital organized under
29 the University of Illinois Hospital Act, or a hospital operated
30 by the United States, or any of its instrumentalities. The
31 information so transmitted shall be afforded the same status as
32 is information concerning medical studies by Part 21 of Article
33 VIII of the Code of Civil Procedure, as now or hereafter
34 amended.

35 (b) All hospitals licensed under this Act, except county
36 hospitals as defined in subsection (c) of Section 15-1 of the

1 Illinois Public Aid Code, shall comply with, and the medical
2 staff bylaws of these hospitals shall include rules consistent
3 with, the provisions of this Section in granting, limiting,
4 renewing, or denying medical staff membership and clinical
5 staff privileges. Hospitals that require medical staff members
6 to possess faculty status with a specific institution of higher
7 education are not required to comply with subsection (1) below
8 when the physician does not possess faculty status.

9 (1) Minimum procedures for pre-applicants and
10 applicants for medical staff membership shall include the
11 following:

12 (A) Written procedures relating to the acceptance
13 and processing of pre-applicants or applicants for
14 medical staff membership, which should be contained in
15 medical staff bylaws.

16 (B) Written procedures to be followed in
17 determining a pre-applicant's or an applicant's
18 qualifications for being granted medical staff
19 membership and privileges.

20 (C) Written criteria to be followed in evaluating a
21 pre-applicant's or an applicant's qualifications.

22 (D) An evaluation of a pre-applicant's or an
23 applicant's current health status and current license
24 status in Illinois.

25 (E) A written response to each pre-applicant or
26 applicant that explains the reason or reasons for any
27 adverse decision (including all reasons based in whole
28 or in part on the applicant's medical qualifications or
29 any other basis, including economic factors).

30 (2) Minimum procedures with respect to medical staff
31 and clinical privilege determinations concerning current
32 members of the medical staff shall include the following:

33 (A) A written notice of an adverse decision.

34 (B) An explanation of the reasons for an adverse
35 decision including all reasons based on the quality of
36 medical care or any other basis, including economic

1 factors.

2 (C) A statement of the medical staff member's right
3 to request a fair hearing on the adverse decision
4 before a hearing panel whose membership is mutually
5 agreed upon by the medical staff and the hospital
6 governing board. The hearing panel shall have
7 independent authority to recommend action to the
8 hospital governing board. Upon the request of the
9 medical staff member or the hospital governing board,
10 the hearing panel shall make findings concerning the
11 nature of each basis for any adverse decision
12 recommended to and accepted by the hospital governing
13 board.

14 (i) Nothing in this subparagraph (C) limits a
15 hospital's or medical staff's right to summarily
16 suspend, without a prior hearing, a person's
17 medical staff membership or clinical privileges if
18 the continuation of practice of a medical staff
19 member constitutes an immediate danger to the
20 public, including patients, visitors, and hospital
21 employees and staff. A fair hearing shall be
22 commenced within 15 days after the suspension and
23 completed without delay.

24 (ii) Nothing in this subparagraph (C) limits a
25 medical staff's right to permit, in the medical
26 staff bylaws, summary suspension of membership or
27 clinical privileges in designated administrative
28 circumstances as specifically approved by the
29 medical staff. This bylaw provision must
30 specifically describe both the administrative
31 circumstance that can result in a summary
32 suspension and the length of the summary
33 suspension. The opportunity for a fair hearing is
34 required for any administrative summary
35 suspension. Any requested hearing must be
36 commenced within 15 days after the summary

1 suspension and completed without delay. Adverse
2 decisions other than suspension or other
3 restrictions on the treatment or admission of
4 patients may be imposed summarily and without a
5 hearing under designated administrative
6 circumstances as specifically provided for in the
7 medical staff bylaws as approved by the medical
8 staff.

9 (iii) If a hospital exercises its option to
10 enter into an exclusive contract and that contract
11 results in the total or partial termination or
12 reduction of medical staff membership or clinical
13 privileges of a current medical staff member, the
14 hospital shall provide the affected medical staff
15 member 60 days prior notice of the effect on his or
16 her medical staff membership or privileges. An
17 affected medical staff member desiring a hearing
18 under subparagraph (C) of this paragraph (2) must
19 request the hearing within 14 days after the date
20 he or she is so notified. The requested hearing
21 shall be commenced and completed (with a report and
22 recommendation to the affected medical staff
23 member, hospital governing board, and medical
24 staff) within 30 days after the date of the medical
25 staff member's request. If agreed upon by both the
26 medical staff and the hospital governing board,
27 the medical staff bylaws may provide for longer
28 time periods.

29 (D) A statement of the member's right to inspect
30 all pertinent information in the hospital's possession
31 with respect to the decision.

32 (E) A statement of the member's right to present
33 witnesses and other evidence at the hearing on the
34 decision.

35 (F) A written notice and written explanation of the
36 decision resulting from the hearing.

1 (F-5) A written notice of a final adverse decision
2 by a hospital governing board.

3 (G) Notice given 15 days before implementation of
4 an adverse medical staff membership or clinical
5 privileges decision based substantially on economic
6 factors. This notice shall be given after the medical
7 staff member exhausts all applicable procedures under
8 this Section, including item (iii) of subparagraph (C)
9 of this paragraph (2), and under the medical staff
10 bylaws in order to allow sufficient time for the
11 orderly provision of patient care.

12 (H) Nothing in this paragraph (2) of this
13 subsection (b) limits a medical staff member's right to
14 waive, in writing, the rights provided in
15 subparagraphs (A) through (G) of this paragraph (2) of
16 this subsection (b) upon being granted the written
17 exclusive right to provide particular services at a
18 hospital, either individually or as a member of a
19 group. If an exclusive contract is signed by a
20 representative of a group of physicians, a waiver
21 contained in the contract shall apply to all members of
22 the group unless stated otherwise in the contract.

23 (3) Every adverse medical staff membership and
24 clinical privilege decision based substantially on
25 economic factors shall be reported to the Hospital
26 Licensing Board before the decision takes effect. These
27 reports shall not be disclosed in any form that reveals the
28 identity of any hospital or physician. These reports shall
29 be utilized to study the effects that hospital medical
30 staff membership and clinical privilege decisions based
31 upon economic factors have on access to care and the
32 availability of physician services. The Hospital Licensing
33 Board shall submit an initial study to the Governor and the
34 General Assembly by January 1, 1996, and subsequent reports
35 shall be submitted periodically thereafter.

36 (4) As used in this Section:

1 "Adverse decision" means a decision reducing,
2 restricting, suspending, revoking, denying, or not
3 renewing medical staff membership or clinical privileges.

4 "Economic factor" means any information or reasons for
5 decisions unrelated to quality of care or professional
6 competency.

7 "Pre-applicant" means a physician licensed to practice
8 medicine in all its branches who requests an application
9 for medical staff membership or privileges.

10 "Privilege" means permission to provide medical or
11 other patient care services and permission to use hospital
12 resources, including equipment, facilities and personnel
13 that are necessary to effectively provide medical or other
14 patient care services. This definition shall not be
15 construed to require a hospital to acquire additional
16 equipment, facilities, or personnel to accommodate the
17 granting of privileges.

18 (5) Any amendment to medical staff bylaws required
19 because of this amendatory Act of the 91st General Assembly
20 shall be adopted on or before July 1, 2001.

21 (c) All hospitals shall consult with the medical staff
22 prior to closing membership in the entire or any portion of the
23 medical staff or a department. If the hospital closes
24 membership in the medical staff, any portion of the medical
25 staff, or the department over the objections of the medical
26 staff, then the hospital shall provide a detailed written
27 explanation for the decision to the medical staff 10 days prior
28 to the effective date of any closure. No applications need to
29 be provided when membership in the medical staff or any
30 relevant portion of the medical staff is closed.

31 (Source: P.A. 90-14, eff. 7-1-97; 90-149, eff. 1-1-98; 90-655,
32 eff. 7-30-98; 91-166, eff. 1-1-00.)

33 Section 35. The Health Care Professional Credentials Data
34 Collection Act is amended by changing Section 15 as follows:

1 (410 ILCS 517/15)

2 Sec. 15. Development and use of uniform health care and
3 hospital credentials forms.

4 (a) The Department, in consultation with the council, shall
5 by rule establish:

6 (1) a uniform health care credentials form that shall
7 include the credentials data commonly requested by health
8 care entities and health care plans for purposes of
9 credentialing and shall minimize the need for the
10 collection of additional credentials data;

11 (2) a uniform health care recredentials form that shall
12 include the credentials data commonly requested by health
13 care entities and health care plans for purposes of
14 recredentialing and shall minimize the need for the
15 collection of additional credentials data;

16 (3) a uniform hospital credentials form that shall
17 include the credentials data commonly requested by
18 hospitals for purposes of credentialing and shall minimize
19 the need for the collection of additional credentials data;

20 (4) a uniform hospital recredentials form that shall
21 include the credentials data commonly requested by
22 hospitals for purposes of recredentialing and shall
23 minimize the need for collection of additional credentials
24 data; and

25 (5) uniform updating forms.

26 (b) The uniform forms established in subsection (a) shall
27 be coordinated to reduce the need to provide redundant
28 information. Further, the forms shall be made available in both
29 paper and electronic formats.

30 (c) The Department, in consultation with the council, shall
31 establish by rule a date after which an electronic format may
32 be required by a health care entity, a health care plan, or a
33 hospital, and a health care professional may require acceptance
34 of an electronic format by a health care entity, a health care
35 plan, or a hospital.

36 (d) Beginning January 1, 2002, each health care entity or

1 health care plan that employs, contracts with, or allows health
2 care professionals to provide medical or health care services
3 and requires health care professionals to be credentialed or
4 recredentialed shall for purposes of collecting credentials
5 data only require:

- 6 (1) the uniform health care credentials form;
- 7 (2) the uniform health care recredentials form;
- 8 (3) the uniform updating forms; and
- 9 (4) any additional credentials data requested.

10 (e) Beginning January 1, 2002, each hospital that employs,
11 contracts with, or allows health care professionals to provide
12 medical or health care services and requires health care
13 professionals to be credentialed or recredentialed shall for
14 purposes of collecting credentials data only require:

- 15 (1) the uniform hospital credentials form;
- 16 (2) the uniform hospital recredentials form;
- 17 (3) the uniform updating forms; and
- 18 (4) any additional credentials data requested.

19 (f) Each health care entity and health care plan shall
20 complete the process of verifying a health care professional's
21 credentials data in a timely fashion and shall complete the
22 process of credentialing or recredentialing of the health care
23 professional within 60 days after submission of all credentials
24 data and completion of verification of the credentials data.

25 (g) Each health care professional shall provide any
26 corrections, updates, and modifications to his or her
27 credentials data to ensure that all credentials data on the
28 health care professional remains current. Such corrections,
29 updates, and modifications shall be provided within 5 business
30 days for State health care professional license revocation,
31 federal Drug Enforcement Agency license revocation, Medicare
32 or Medicaid sanctions, revocation of hospital privileges, any
33 lapse in professional liability coverage required by a health
34 care entity, health care plan, or hospital, or conviction of a
35 felony, and within 45 days for any other change in the
36 information from the date the health care professional knew of

1 the change. All updates shall be made on the uniform updating
2 forms developed by the Department.

3 (h) Any credentials data collected or obtained by the
4 health care entity, health care plan, or hospital shall be
5 confidential, as provided by law, and otherwise may not be
6 redisclosed without written consent of the health care
7 professional, except that in any proceeding to challenge
8 credentialing or recredentialing, or in any judicial review,
9 the claim of confidentiality shall not be invoked to deny a
10 health care professional, health care entity, health care plan,
11 or hospital access to or use of credentials data. Nothing in
12 this Section prevents a health care entity, health care plan,
13 or hospital from disclosing any credentials data to its
14 officers, directors, employees, agents, subcontractors,
15 medical staff members, any committee of the health care entity,
16 health care plan, or hospital involved in the credentialing
17 process, or accreditation bodies or licensing agencies.
18 However, any redisclosure of credentials data contrary to this
19 Section is prohibited.

20 (i) Nothing in this Act shall be construed to restrict the
21 right of any health care entity, health care plan or hospital
22 to request additional information necessary for credentialing
23 or recredentialing.

24 (j) Nothing in this Act shall be construed to restrict in
25 any way the authority of any health care entity, health care
26 plan or hospital to approve, suspend or deny an application for
27 hospital staff membership, clinical privileges, or managed
28 care network participation.

29 (k) Nothing in this Act shall be construed to prohibit
30 delegation of credentialing and recredentialing activities as
31 long as the delegated entity follows the requirements set forth
32 in this Act.

33 (l) Nothing in this Act shall be construed to require any
34 health care entity or health care plan to credential or survey
35 any health care professional.

36 (m) Nothing in this Act prohibits a hospital from granting

1 disaster privileges pursuant to the provisions of Section 10.4
2 of the Hospital Licensing Act. When a hospital grants disaster
3 privileges pursuant to Section 10.4 of the Hospital Licensing
4 Act, that hospital is not required to collect credentials data
5 pursuant to this Act.

6 (Source: P.A. 91-602, eff. 8-16-99; 92-193, eff. 1-1-02.)

7 Section 40. The Illinois Vehicle Code is amended by
8 changing Sections 1-105 and 12-215 as follows:

9 (625 ILCS 5/1-105) (from Ch. 95 1/2, par. 1-105)

10 Sec. 1-105. Authorized emergency vehicle. Emergency
11 vehicles of municipal departments or public service
12 corporations as are designated or authorized by proper local
13 authorities; police vehicles; vehicles of the fire department;
14 ambulances; vehicles of the Illinois Emergency Management
15 Agency; vehicles of the Illinois Department of Public Health;
16 and vehicles of the Department of Nuclear Safety.

17 (Source: P.A. 92-138, eff. 7-24-01.)

18 (625 ILCS 5/12-215) (from Ch. 95 1/2, par. 12-215)

19 Sec. 12-215. Oscillating, rotating or flashing lights on
20 motor vehicles. Except as otherwise provided in this Code:

21 (a) The use of red or white oscillating, rotating or
22 flashing lights, whether lighted or unlighted, is prohibited
23 except on:

24 1. Law enforcement vehicles of State, Federal or local
25 authorities;

26 2. A vehicle operated by a police officer or county
27 coroner and designated or authorized by local authorities,
28 in writing, as a law enforcement vehicle; however, such
29 designation or authorization must be carried in the
30 vehicle;

31 3. Vehicles of local fire departments and State or
32 federal firefighting vehicles;

33 4. Vehicles which are designed and used exclusively as

1 ambulances or rescue vehicles; furthermore, such lights
2 shall not be lighted except when responding to an emergency
3 call for and while actually conveying the sick or injured;

4 5. Tow trucks licensed in a state that requires such
5 lights; furthermore, such lights shall not be lighted on
6 any such tow truck while the tow truck is operating in the
7 State of Illinois;

8 6. Vehicles of the Illinois Emergency Management
9 Agency, vehicles of the Illinois Department of Public
10 Health, and vehicles of the Department of Nuclear Safety;

11 7. Vehicles operated by a local or county emergency
12 management services agency as defined in the Illinois
13 Emergency Management Agency Act; and

14 8. School buses operating alternately flashing head
15 lamps as permitted under Section 12-805 of this Code.

16 (b) The use of amber oscillating, rotating or flashing
17 lights, whether lighted or unlighted, is prohibited except on:

18 1. Second division vehicles designed and used for
19 towing or hoisting vehicles; furthermore, such lights
20 shall not be lighted except as required in this paragraph
21 1; such lights shall be lighted when such vehicles are
22 actually being used at the scene of an accident or
23 disablement; if the towing vehicle is equipped with a flat
24 bed that supports all wheels of the vehicle being
25 transported, the lights shall not be lighted while the
26 vehicle is engaged in towing on a highway; if the towing
27 vehicle is not equipped with a flat bed that supports all
28 wheels of a vehicle being transported, the lights shall be
29 lighted while the towing vehicle is engaged in towing on a
30 highway during all times when the use of headlights is
31 required under Section 12-201 of this Code;

32 2. Motor vehicles or equipment of the State of
33 Illinois, local authorities and contractors; furthermore,
34 such lights shall not be lighted except while such vehicles
35 are engaged in maintenance or construction operations
36 within the limits of construction projects;

1 3. Vehicles or equipment used by engineering or survey
2 crews; furthermore, such lights shall not be lighted except
3 while such vehicles are actually engaged in work on a
4 highway;

5 4. Vehicles of public utilities, municipalities, or
6 other construction, maintenance or automotive service
7 vehicles except that such lights shall be lighted only as a
8 means for indicating the presence of a vehicular traffic
9 hazard requiring unusual care in approaching, overtaking
10 or passing while such vehicles are engaged in maintenance,
11 service or construction on a highway;

12 5. Oversized vehicle or load; however, such lights
13 shall only be lighted when moving under permit issued by
14 the Department under Section 15-301 of this Code;

15 6. The front and rear of motorized equipment owned and
16 operated by the State of Illinois or any political
17 subdivision thereof, which is designed and used for removal
18 of snow and ice from highways;

19 7. Fleet safety vehicles registered in another state,
20 furthermore, such lights shall not be lighted except as
21 provided for in Section 12-212 of this Code;

22 8. Such other vehicles as may be authorized by local
23 authorities;

24 9. Law enforcement vehicles of State or local
25 authorities when used in combination with red oscillating,
26 rotating or flashing lights;

27 9.5. Propane delivery trucks;

28 10. Vehicles used for collecting or delivering mail for
29 the United States Postal Service provided that such lights
30 shall not be lighted except when such vehicles are actually
31 being used for such purposes;

32 11. Any vehicle displaying a slow-moving vehicle
33 emblem as provided in Section 12-205.1;

34 12. All trucks equipped with self-compactors or
35 roll-off hoists and roll-on containers for garbage or
36 refuse hauling. Such lights shall not be lighted except

1 when such vehicles are actually being used for such
2 purposes;

3 13. Vehicles used by a security company, alarm
4 responder, or control agency;

5 14. Security vehicles of the Department of Human
6 Services; however, the lights shall not be lighted except
7 when being used for security related purposes under the
8 direction of the superintendent of the facility where the
9 vehicle is located; and

10 15. Vehicles of union representatives, except that the
11 lights shall be lighted only while the vehicle is within
12 the limits of a construction project.

13 (c) The use of blue oscillating, rotating or flashing
14 lights, whether lighted or unlighted, is prohibited except on:

15 1. Rescue squad vehicles not owned by a fire department
16 and vehicles owned or fully operated by a:

17 voluntary firefighter;

18 paid firefighter;

19 part-paid firefighter;

20 call firefighter;

21 member of the board of trustees of a fire
22 protection district;

23 paid or unpaid member of a rescue squad;

24 paid or unpaid member of a voluntary ambulance
25 unit; or

26 paid or unpaid members of a local or county
27 emergency management services agency as defined in the
28 Illinois Emergency Management Agency Act, designated
29 or authorized by local authorities, in writing, and
30 carrying that designation or authorization in the
31 vehicle.

32 However, such lights are not to be lighted except when
33 responding to a bona fide emergency.

34 2. Police department vehicles in cities having a
35 population of 500,000 or more inhabitants.

36 3. Law enforcement vehicles of State or local

1 authorities when used in combination with red oscillating,
2 rotating or flashing lights.

3 4. Vehicles of local fire departments and State or
4 federal firefighting vehicles when used in combination
5 with red oscillating, rotating or flashing lights.

6 5. Vehicles which are designed and used exclusively as
7 ambulances or rescue vehicles when used in combination with
8 red oscillating, rotating or flashing lights; furthermore,
9 such lights shall not be lighted except when responding to
10 an emergency call.

11 6. Vehicles that are equipped and used exclusively as
12 organ transport vehicles when used in combination with red
13 oscillating, rotating, or flashing lights; furthermore,
14 these lights shall only be lighted when the transportation
15 is declared an emergency by a member of the transplant team
16 or a representative of the organ procurement organization.

17 7. Vehicles of the Illinois Emergency Management
18 Agency, vehicles of the Illinois Department of Public
19 Health, and vehicles of the Department of Nuclear Safety,
20 when used in combination with red oscillating, rotating, or
21 flashing lights.

22 8. Vehicles operated by a local or county emergency
23 management services agency as defined in the Illinois
24 Emergency Management Agency Act, when used in combination
25 with red oscillating, rotating, or flashing lights.

26 (c-1) In addition to the blue oscillating, rotating, or
27 flashing lights permitted under subsection (c), and
28 notwithstanding subsection (a), a vehicle operated by a
29 voluntary firefighter, a voluntary member of a rescue squad, or
30 a member of a voluntary ambulance unit may be equipped with
31 flashing white headlights and blue grill lights, which may be
32 used only in responding to an emergency call.

33 (c-2) In addition to the blue oscillating, rotating, or
34 flashing lights permitted under subsection (c), and
35 notwithstanding subsection (a), a vehicle operated by a paid or
36 unpaid member of a local or county emergency management

1 services agency as defined in the Illinois Emergency Management
2 Agency Act, may be equipped with white oscillating, rotating,
3 or flashing lights to be used in combination with blue
4 oscillating, rotating, or flashing lights, if authorization by
5 local authorities is in writing and carried in the vehicle.

6 (d) The use of a combination of amber and white
7 oscillating, rotating or flashing lights, whether lighted or
8 unlighted, is prohibited except motor vehicles or equipment of
9 the State of Illinois, local authorities, contractors, and
10 union representatives may be so equipped; furthermore, such
11 lights shall not be lighted on vehicles of the State of
12 Illinois, local authorities, and contractors except while such
13 vehicles are engaged in highway maintenance or construction
14 operations within the limits of highway construction projects,
15 and shall not be lighted on the vehicles of union
16 representatives except when those vehicles are within the
17 limits of a construction project.

18 (e) All oscillating, rotating or flashing lights referred
19 to in this Section shall be of sufficient intensity, when
20 illuminated, to be visible at 500 feet in normal sunlight.

21 (f) Nothing in this Section shall prohibit a manufacturer
22 of oscillating, rotating or flashing lights or his
23 representative from temporarily mounting such lights on a
24 vehicle for demonstration purposes only.

25 (g) Any person violating the provisions of subsections (a),
26 (b), (c) or (d) of this Section who without lawful authority
27 stops or detains or attempts to stop or detain another person
28 shall be guilty of a Class 4 felony.

29 (h) Except as provided in subsection (g) above, any person
30 violating the provisions of subsections (a) or (c) of this
31 Section shall be guilty of a Class A misdemeanor.

32 (Source: P.A. 92-138, eff. 7-24-01; 92-407, eff. 8-17-01;
33 92-651, eff. 7-11-02; 92-782, eff. 8-6-02; 92-820, eff.
34 8-21-02; 92-872, eff. 6-1-03; 93-181, eff. 1-1-04.)

35 Section 45. The Communicable Disease Report Act is amended

1 by changing Section 1 as follows:

2 (745 ILCS 45/1) (from Ch. 126, par. 21)

3 Sec. 1. Whenever any statute of this State or any ordinance
4 or resolution of a municipal corporation or political
5 subdivision enacted pursuant to statute or any rule of an
6 administrative agency adopted pursuant to statute requires
7 medical practitioners or other persons to report cases of
8 injury, medical condition or procedure, communicable disease,
9 venereal disease, or sexually transmitted disease to any
10 governmental agency or officer, such reports shall be
11 confidential, and any medical practitioner or other person
12 making such report in good faith shall be immune from suit for
13 slander or libel based upon any statements contained in such
14 report.

15 The identity of any individual who makes a report or who is
16 identified in a report of an injury, medical condition or
17 procedure, communicable disease, venereal disease, sexually
18 transmitted disease, or food-borne illness or an investigation
19 conducted pursuant to a report of an injury, medical condition
20 or procedure, communicable disease, venereal disease, sexually
21 transmitted disease, or food-borne illness shall be
22 confidential and the identity of any person making a report or
23 named therein shall not be disclosed publicly or in any action
24 of any kind in any court or before any tribunal, board or
25 agency; provided that records and communications concerning a
26 venereal disease or sexually transmitted disease in any minor
27 under 11 years of age shall be disclosed in accordance with the
28 provisions of the Abused and Neglected Child Reporting Act,
29 approved June 26, 1975, as now or hereafter amended.

30 The confidentiality provisions of this Act do not apply to
31 the results of tests for diseases conducted pursuant to
32 subsections (g) and (g-5) of Section 5-5-3 and subsection (a)
33 of Section 3-15-2 of the Unified Code of Corrections.

34 Nothing in this Act prohibits the sharing of information as
35 authorized in Section 2.1 of the Department of Public Health

1 Act.

2 (Source: P.A. 89-187, eff. 7-19-95; 89-381, eff. 8-18-95;
3 89-477, eff. 6-18-96; 89-626, eff. 8-9-96.)

4 Section 50. The Workers' Compensation Act is amended by
5 changing Section 11 as follows:

6 (820 ILCS 305/11) (from Ch. 48, par. 138.11)

7 Sec. 11. The compensation herein provided, together with
8 the provisions of this Act, shall be the measure of the
9 responsibility of any employer engaged in any of the
10 enterprises or businesses enumerated in Section 3 of this Act,
11 or of any employer who is not engaged in any such enterprises
12 or businesses, but who has elected to provide and pay
13 compensation for accidental injuries sustained by any employee
14 arising out of and in the course of the employment according to
15 the provisions of this Act, and whose election to continue
16 under this Act, has not been nullified by any action of his
17 employees as provided for in this Act.

18 Accidental injuries incurred while participating in
19 voluntary recreational programs including but not limited to
20 athletic events, parties and picnics do not arise out of and in
21 the course of the employment even though the employer pays some
22 or all of the cost thereof. This exclusion shall not apply in
23 the event that the injured employee was ordered or assigned by
24 his employer to participate in the program.

25 Accidental injuries incurred while participating as a
26 patient in a drug or alcohol rehabilitation program do not
27 arise out of and in the course of employment even though the
28 employer pays some or all of the costs thereof.

29 Any injury to or disease or death of an employee arising
30 from the administration of a vaccine, including without
31 limitation smallpox vaccine, to prepare for, or as a response
32 to, a threatened or potential bioterrorist incident to the
33 employee as part of a voluntary inoculation program in
34 connection with the person's employment or in connection with

1 any governmental program or recommendation for the inoculation
2 of workers in the employee's occupation, geographical area, or
3 other category that includes the employee is deemed to arise
4 out of and in the course of the employment for all purposes
5 under this Act. This paragraph added by this amendatory Act of
6 the 93rd General Assembly is declarative of existing law and is
7 not a new enactment.

8 (Source: P.A. 81-1482.)

9 Section 55. The Workers' Occupational Diseases Act is
10 amended by changing Section 1 as follows:

11 (820 ILCS 310/1) (from Ch. 48, par. 172.36)

12 Sec. 1. This Act shall be known and may be cited as the
13 "Workers' Occupational Diseases Act".

14 (a) The term "employer" as used in this Act shall be
15 construed to be:

16 1. The State and each county, city, town, township,
17 incorporated village, school district, body politic, or
18 municipal corporation therein.

19 2. Every person, firm, public or private corporation,
20 including hospitals, public service, eleemosynary, religious
21 or charitable corporations or associations, who has any person
22 in service or under any contract for hire, express or implied,
23 oral or written.

24 3. Where an employer operating under and subject to the
25 provisions of this Act loans an employee to another such
26 employer and such loaned employee sustains a compensable
27 occupational disease in the employment of such borrowing
28 employer and where such borrowing employer does not provide or
29 pay the benefits or payments due such employee, such loaning
30 employer shall be liable to provide or pay all benefits or
31 payments due such employee under this Act and as to such
32 employee the liability of such loaning and borrowing employers
33 shall be joint and several, provided that such loaning employer
34 shall in the absence of agreement to the contrary be entitled

1 to receive from such borrowing employer full reimbursement for
2 all sums paid or incurred pursuant to this paragraph together
3 with reasonable attorneys' fees and expenses in any hearings
4 before the Industrial Commission or in any action to secure
5 such reimbursement. Where any benefit is provided or paid by
6 such loaning employer, the employee shall have the duty of
7 rendering reasonable co-operation in any hearings, trials or
8 proceedings in the case, including such proceedings for
9 reimbursement.

10 Where an employee files an Application for Adjustment of
11 Claim with the Industrial Commission alleging that his or her
12 claim is covered by the provisions of the preceding paragraph,
13 and joining both the alleged loaning and borrowing employers,
14 they and each of them, upon written demand by the employee and
15 within 7 days after receipt of such demand, shall have the duty
16 of filing with the Industrial Commission a written admission or
17 denial of the allegation that the claim is covered by the
18 provisions of the preceding paragraph and in default of such
19 filing or if any such denial be ultimately determined not to
20 have been bona fide then the provisions of Paragraph K of
21 Section 19 of this Act shall apply.

22 An employer whose business or enterprise or a substantial
23 part thereof consists of hiring, procuring or furnishing
24 employees to or for other employers operating under and subject
25 to the provisions of this Act for the performance of the work
26 of such other employers and who pays such employees their
27 salary or wage notwithstanding that they are doing the work of
28 such other employers shall be deemed a loaning employer within
29 the meaning and provisions of this Section.

30 (b) The term "employee" as used in this Act, shall be
31 construed to mean:

32 1. Every person in the service of the State, county, city,
33 town, township, incorporated village or school district, body
34 politic or municipal corporation therein, whether by election,
35 appointment or contract of hire, express or implied, oral or
36 written, including any official of the State, or of any county,

1 city, town, township, incorporated village, school district,
2 body politic or municipal corporation therein and except any
3 duly appointed member of the fire department in any city whose
4 population exceeds 500,000 according to the last Federal or
5 State census, and except any member of a fire insurance patrol
6 maintained by a board of underwriters in this State. One
7 employed by a contractor who has contracted with the State, or
8 a county, city, town, township, incorporated village, school
9 district, body politic or municipal corporation therein,
10 through its representatives, shall not be considered as an
11 employee of the State, county, city, town, township,
12 incorporated village, school district, body politic or
13 municipal corporation which made the contract.

14 2. Every person in the service of another under any
15 contract of hire, express or implied, oral or written, who
16 contracts an occupational disease while working in the State of
17 Illinois, or who contracts an occupational disease while
18 working outside of the State of Illinois but where the contract
19 of hire is made within the State of Illinois, and any person
20 whose employment is principally localized within the State of
21 Illinois, regardless of the place where the disease was
22 contracted or place where the contract of hire was made,
23 including aliens, and minors who, for the purpose of this Act,
24 except Section 3 hereof, shall be considered the same and have
25 the same power to contract, receive payments and give
26 quittances therefor, as adult employees. An employee or his or
27 her dependents under this Act who shall have a cause of action
28 by reason of an occupational disease, disablement or death
29 arising out of and in the course of his or her employment may
30 elect or pursue his or her remedy in the State where the
31 disease was contracted, or in the State where the contract of
32 hire is made, or in the State where the employment is
33 principally localized.

34 (c) "Commission" means the Industrial Commission created
35 by the Workers' Compensation Act, approved July 9, 1951, as
36 amended.

1 (d) In this Act the term "Occupational Disease" means a
2 disease arising out of and in the course of the employment or
3 which has become aggravated and rendered disabling as a result
4 of the exposure of the employment. Such aggravation shall arise
5 out of a risk peculiar to or increased by the employment and
6 not common to the general public.

7 A disease shall be deemed to arise out of the employment if
8 there is apparent to the rational mind, upon consideration of
9 all the circumstances, a causal connection between the
10 conditions under which the work is performed and the
11 occupational disease. The disease need not to have been
12 foreseen or expected but after its contraction it must appear
13 to have had its origin or aggravation in a risk connected with
14 the employment and to have flowed from that source as a
15 rational consequence.

16 An employee shall be conclusively deemed to have been
17 exposed to the hazards of an occupational disease when, for any
18 length of time however short, he or she is employed in an
19 occupation or process in which the hazard of the disease
20 exists; provided however, that in a claim of exposure to atomic
21 radiation, the fact of such exposure must be verified by the
22 records of the central registry of radiation exposure
23 maintained by the Department of Public Health or by some other
24 recognized governmental agency maintaining records of such
25 exposures whenever and to the extent that the records are on
26 file with the Department of Public Health or the agency.

27 Any injury to or disease or death of an employee arising
28 from the administration of a vaccine, including without
29 limitation smallpox vaccine, to prepare for, or as a response
30 to, a threatened or potential bioterrorist incident to the
31 employee as part of a voluntary inoculation program in
32 connection with the person's employment or in connection with
33 any governmental program or recommendation for the inoculation
34 of workers in the employee's occupation, geographical area, or
35 other category that includes the employee is deemed to arise
36 out of and in the course of the employment for all purposes

1 under this Act. This paragraph added by this amendatory Act of
2 the 93rd General Assembly is declarative of existing law and is
3 not a new enactment.

4 The employer liable for the compensation in this Act
5 provided shall be the employer in whose employment the employee
6 was last exposed to the hazard of the occupational disease
7 claimed upon regardless of the length of time of such last
8 exposure, except, in cases of silicosis or asbestosis, the only
9 employer liable shall be the last employer in whose employment
10 the employee was last exposed during a period of 60 days or
11 more after the effective date of this Act, to the hazard of
12 such occupational disease, and, in such cases, an exposure
13 during a period of less than 60 days, after the effective date
14 of this Act, shall not be deemed a last exposure. If a miner
15 who is suffering or suffered from pneumoconiosis was employed
16 for 10 years or more in one or more coal mines there shall,
17 effective July 1, 1973 be a rebuttable presumption that his or
18 her pneumoconiosis arose out of such employment.

19 If a deceased miner was employed for 10 years or more in
20 one or more coal mines and died from a respirable disease there
21 shall, effective July 1, 1973, be a rebuttable presumption that
22 his or her death was due to pneumoconiosis.

23 The insurance carrier liable shall be the carrier whose
24 policy was in effect covering the employer liable on the last
25 day of the exposure rendering such employer liable in
26 accordance with the provisions of this Act.

27 (e) "Disablement" means an impairment or partial
28 impairment, temporary or permanent, in the function of the body
29 or any of the members of the body, or the event of becoming
30 disabled from earning full wages at the work in which the
31 employee was engaged when last exposed to the hazards of the
32 occupational disease by the employer from whom he or she claims
33 compensation, or equal wages in other suitable employment; and
34 "disability" means the state of being so incapacitated.

35 (f) No compensation shall be payable for or on account of
36 any occupational disease unless disablement, as herein

1 defined, occurs within two years after the last day of the last
2 exposure to the hazards of the disease, except in cases of
3 occupational disease caused by berylliosis or by the inhalation
4 of silica dust or asbestos dust and, in such cases, within 3
5 years after the last day of the last exposure to the hazards of
6 such disease and except in the case of occupational disease
7 caused by exposure to radiological materials or equipment, and
8 in such case, within 25 years after the last day of last
9 exposure to the hazards of such disease.

10 (Source: P.A. 81-992.)

11 Section 60. The Illinois Administrative Procedure Act is
12 amended by changing Section 5-45 as follows:

13 (5 ILCS 100/5-45) (from Ch. 127, par. 1005-45)

14 Sec. 5-45. Emergency rulemaking.

15 (a) "Emergency" means the existence of any situation that
16 any agency finds reasonably constitutes a threat to the public
17 interest, safety, or welfare.

18 (b) If any agency finds that an emergency exists that
19 requires adoption of a rule upon fewer days than is required by
20 Section 5-40 and states in writing its reasons for that
21 finding, the agency may adopt an emergency rule without prior
22 notice or hearing upon filing a notice of emergency rulemaking
23 with the Secretary of State under Section 5-70. The notice
24 shall include the text of the emergency rule and shall be
25 published in the Illinois Register. Consent orders or other
26 court orders adopting settlements negotiated by an agency may
27 be adopted under this Section. Subject to applicable
28 constitutional or statutory provisions, an emergency rule
29 becomes effective immediately upon filing under Section 5-65 or
30 at a stated date less than 10 days thereafter. The agency's
31 finding and a statement of the specific reasons for the finding
32 shall be filed with the rule. The agency shall take reasonable
33 and appropriate measures to make emergency rules known to the
34 persons who may be affected by them.

1 (c) An emergency rule may be effective for a period of not
2 longer than 150 days, but the agency's authority to adopt an
3 identical rule under Section 5-40 is not precluded. No
4 emergency rule may be adopted more than once in any 24 month
5 period, except that this limitation on the number of emergency
6 rules that may be adopted in a 24 month period does not apply
7 to (i) emergency rules that make additions to and deletions
8 from the Drug Manual under Section 5-5.16 of the Illinois
9 Public Aid Code or the generic drug formulary under Section
10 3.14 of the Illinois Food, Drug and Cosmetic Act, ~~or~~ (ii)
11 emergency rules adopted by the Pollution Control Board before
12 July 1, 1997 to implement portions of the Livestock Management
13 Facilities Act; or (iii) emergency rules adopted by the
14 Illinois Department of Public Health under subsections (a)
15 through (i) of Section 2 of the Department of Public Health Act
16 when necessary to protect the public's health. Two or more
17 emergency rules having substantially the same purpose and
18 effect shall be deemed to be a single rule for purposes of this
19 Section.

20 (d) In order to provide for the expeditious and timely
21 implementation of the State's fiscal year 1999 budget,
22 emergency rules to implement any provision of Public Act 90-587
23 or 90-588 or any other budget initiative for fiscal year 1999
24 may be adopted in accordance with this Section by the agency
25 charged with administering that provision or initiative,
26 except that the 24-month limitation on the adoption of
27 emergency rules and the provisions of Sections 5-115 and 5-125
28 do not apply to rules adopted under this subsection (d). The
29 adoption of emergency rules authorized by this subsection (d)
30 shall be deemed to be necessary for the public interest,
31 safety, and welfare.

32 (e) In order to provide for the expeditious and timely
33 implementation of the State's fiscal year 2000 budget,
34 emergency rules to implement any provision of this amendatory
35 Act of the 91st General Assembly or any other budget initiative
36 for fiscal year 2000 may be adopted in accordance with this

1 Section by the agency charged with administering that provision
2 or initiative, except that the 24-month limitation on the
3 adoption of emergency rules and the provisions of Sections
4 5-115 and 5-125 do not apply to rules adopted under this
5 subsection (e). The adoption of emergency rules authorized by
6 this subsection (e) shall be deemed to be necessary for the
7 public interest, safety, and welfare.

8 (f) In order to provide for the expeditious and timely
9 implementation of the State's fiscal year 2001 budget,
10 emergency rules to implement any provision of this amendatory
11 Act of the 91st General Assembly or any other budget initiative
12 for fiscal year 2001 may be adopted in accordance with this
13 Section by the agency charged with administering that provision
14 or initiative, except that the 24-month limitation on the
15 adoption of emergency rules and the provisions of Sections
16 5-115 and 5-125 do not apply to rules adopted under this
17 subsection (f). The adoption of emergency rules authorized by
18 this subsection (f) shall be deemed to be necessary for the
19 public interest, safety, and welfare.

20 (g) In order to provide for the expeditious and timely
21 implementation of the State's fiscal year 2002 budget,
22 emergency rules to implement any provision of this amendatory
23 Act of the 92nd General Assembly or any other budget initiative
24 for fiscal year 2002 may be adopted in accordance with this
25 Section by the agency charged with administering that provision
26 or initiative, except that the 24-month limitation on the
27 adoption of emergency rules and the provisions of Sections
28 5-115 and 5-125 do not apply to rules adopted under this
29 subsection (g). The adoption of emergency rules authorized by
30 this subsection (g) shall be deemed to be necessary for the
31 public interest, safety, and welfare.

32 (h) In order to provide for the expeditious and timely
33 implementation of the State's fiscal year 2003 budget,
34 emergency rules to implement any provision of this amendatory
35 Act of the 92nd General Assembly or any other budget initiative
36 for fiscal year 2003 may be adopted in accordance with this

1 Section by the agency charged with administering that provision
2 or initiative, except that the 24-month limitation on the
3 adoption of emergency rules and the provisions of Sections
4 5-115 and 5-125 do not apply to rules adopted under this
5 subsection (h). The adoption of emergency rules authorized by
6 this subsection (h) shall be deemed to be necessary for the
7 public interest, safety, and welfare.

8 (i) In order to provide for the expeditious and timely
9 implementation of the State's fiscal year 2004 budget,
10 emergency rules to implement any provision of this amendatory
11 Act of the 93rd General Assembly or any other budget initiative
12 for fiscal year 2004 may be adopted in accordance with this
13 Section by the agency charged with administering that provision
14 or initiative, except that the 24-month limitation on the
15 adoption of emergency rules and the provisions of Sections
16 5-115 and 5-125 do not apply to rules adopted under this
17 subsection (i). The adoption of emergency rules authorized by
18 this subsection (i) shall be deemed to be necessary for the
19 public interest, safety, and welfare.

20 (Source: P.A. 92-10, eff. 6-11-01; 92-597, eff. 6-28-02; 93-20,
21 eff. 6-20-03.)

22 Section 99. Effective date. This Act takes effect upon
23 becoming law.