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1 AMENDMENT TO HOUSE BILL 5164

2 AMENDMENT NO. _____. Amend House Bill 5164, AS AMENDED, by
3 replacing everything after the enacting clause with the
4 following:

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

8 (20 ILCS 2105/2105-400 new)

9 Sec. 2105-400. Emergency Powers.

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

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

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

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

3 (3) The power to expand the exemption in Section 4(a)
4 of the Pharmacy Practice Act of 1987 to those licensed
5 professionals whose scope of practice has been modified,
6 under paragraph (2) of subsection (a) of this Section, to
7 include any element of the practice of pharmacy as defined
8 in the Pharmacy Practice Act of 1987 for any person working
9 under the direction of the Illinois Emergency Management
10 Agency and the Illinois Department of Public Health
11 pursuant to the declared disaster.

12 (b) Persons exempt from licensure under paragraph (1) of
13 subsection (a) of this Section and persons operating under
14 modified scope of practice provisions under paragraph (2) of
15 subsection (a) of this Section shall be exempt from licensure
16 or be subject to modified scope of practice only until the
17 declared disaster has ended as provided by law.

18 (c) The Director shall exercise these powers by way of
19 proclamation.

20 Section 10. The Department of Public Health Act is amended
21 by changing Sections 2 and 7 and by adding Section 2.1 as
22 follows:

23 (20 ILCS 2305/2) (from Ch. 111 1/2, par. 22)

24 Sec. 2. Powers.

25 (a) The State Department of Public Health has general
26 supervision of the interests of the health and lives of the
27 people of the State. It has supreme authority in matters of
28 quarantine and isolation, and may declare and enforce
29 quarantine and isolation when none exists, and may modify or
30 relax quarantine and isolation when it has been established.
31 The Department may adopt, promulgate, repeal and amend rules
32 and regulations and make such sanitary investigations and

1 inspections as it may from time to time deem necessary for the
2 preservation and improvement of the public health, consistent
3 with law regulating the following:

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

5 (2) Sanitary practices relating to drinking water made
6 accessible to the public for human consumption or for
7 lavatory or culinary purposes.

8 (3) Sanitary practices relating to rest room
9 facilities made accessible to the public or to persons
10 handling food served to the public.

11 (4) Sanitary practices relating to disposal of human
12 wastes in or from all buildings and places where people
13 live, work or assemble.

14 The provisions of the Illinois Administrative Procedure
15 Act are hereby expressly adopted and shall apply to all
16 administrative rules and procedures of the Department of Public
17 Health under this Act, except that Section 5-35 of the Illinois
18 Administrative Procedure Act relating to procedures for
19 rule-making does not apply to the adoption of any rule required
20 by federal law in connection with which the Department is
21 precluded by law from exercising any discretion.

22 All local boards of health, health authorities and
23 officers, police officers, sheriffs and all other officers and
24 employees of the state or any locality shall enforce the rules
25 and regulations so adopted and orders issued by the Department
26 pursuant to this Section.

27 The Department of Public Health shall conduct a public
28 information campaign to inform Hispanic women of the high
29 incidence of breast cancer and the importance of mammograms and
30 where to obtain a mammogram. This requirement may be satisfied
31 by translation into Spanish and distribution of the breast
32 cancer summaries required by Section 2310-345 of the Department
33 of Public Health Powers and Duties Law (20 ILCS 2310/2310-345).
34 The information provided by the Department of Public Health

1 shall include (i) a statement that mammography is the most
2 accurate method for making an early detection of breast cancer,
3 however, no diagnostic tool is 100% effective and (ii)
4 instructions for performing breast self-examination and a
5 statement that it is important to perform a breast
6 self-examination monthly.

7 The Department of Public Health shall investigate the
8 causes of dangerously contagious or infectious diseases,
9 especially when existing in epidemic form, and take means to
10 restrict and suppress the same, and whenever such disease
11 becomes, or threatens to become epidemic, in any locality and
12 the local board of health or local authorities neglect or
13 refuse to enforce efficient measures for its restriction or
14 suppression or to act with sufficient promptness or efficiency,
15 or whenever the local board of health or local authorities
16 neglect or refuse to promptly enforce efficient measures for
17 the restriction or suppression of dangerously contagious or
18 infectious diseases, the Department of Public Health may
19 enforce such measures as it deems necessary to protect the
20 public health, and all necessary expenses so incurred shall be
21 paid by the locality for which services are rendered.

22 (b) Subject to the provisions of subsection (c), the
23 Department may order a person or group of persons to be
24 quarantined or isolated or may order a place to be closed and
25 made off limits to the public to prevent the probable spread of
26 a dangerously contagious or infectious disease, including
27 non-compliant tuberculosis patients, until such time as the
28 condition can be corrected or the danger to the public health
29 eliminated or reduced in such a manner that no substantial
30 danger to the public's health any longer exists. Orders for
31 isolation of a person or quarantine of a place to prevent the
32 probable spread of a sexually transmissible disease shall be
33 governed by the provisions of Section 7 of the Illinois
34 Sexually Transmissible Disease Control Act and not this

1 Section.

2 (c) Except as provided in this Section, no person or a
3 group of persons may be ordered to be quarantined or isolated
4 and no place may be ordered to be closed and made off limits to
5 the public except with the consent of the person or owner of
6 the place or upon the prior order of a court of competent
7 jurisdiction. The Department may, however, order a person or a
8 group of persons to be quarantined or isolated or may order a
9 place to be closed and made off limits to the public on an
10 immediate basis without prior consent or court order if, in the
11 reasonable judgment of the Department, immediate action is
12 required to protect the public from a dangerously contagious or
13 infectious disease. In the event of an immediate order issued
14 without prior consent or court order, the Department shall, as
15 soon as practical, within 48 hours after issuing the order,
16 obtain the consent of the person or owner or file a petition
17 requesting a court order authorizing the isolation or
18 quarantine or closure. When exigent circumstances exist that
19 cause the court system to be unavailable or that make it
20 impossible to obtain consent or file a petition within 48 hours
21 after issuance of an immediate order, the Department must
22 obtain consent or file a petition requesting a court order as
23 soon as reasonably possible. To obtain a court order, the
24 Department, by clear and convincing evidence, must prove that
25 the public's health and welfare are significantly endangered by
26 a person or group of persons that has, that is suspected of
27 having, that has been exposed to, or that is reasonably
28 believed to have been exposed to ~~with~~ a dangerously contagious
29 or infectious disease including non-compliant tuberculosis
30 patients or by a place where there is a significant amount of
31 activity likely to spread a dangerously contagious or
32 infectious disease. The Department must also prove that all
33 other reasonable means of correcting the problem have been
34 exhausted and no less restrictive alternative exists. For

1 purposes of this subsection, in determining whether no less
2 restrictive alternative exists, the court shall consider
3 evidence showing that, under the circumstances presented by the
4 case in which an order is sought, quarantine or isolation is
5 the measure provided for in a rule of the Department or in
6 guidelines issued by the Centers for Disease Control and
7 Prevention or the World Health Organization. Persons who are or
8 are about to be ordered to be isolated or quarantined and
9 owners of places that are or are about to be closed and made
10 off limits to the public shall have the right to counsel. If a
11 person or owner is indigent, the court shall appoint counsel
12 for that person or owner. Persons who are ordered to be
13 isolated or quarantined or who are owners of places that are
14 ordered to be closed and made off limits to the public, shall
15 be given a written notice of such order. The written notice
16 shall additionally include the following: (1) notice of the
17 right to counsel; (2) notice that if the person or owner is
18 indigent, the court will appoint counsel for that person or
19 owner; (3) notice of the reason for the order for isolation,
20 quarantine, or closure; (4) notice of whether the order is an
21 immediate order, and if so, the time frame for the Department
22 to seek consent or to file a petition requesting a court order
23 as set out in this subsection; and (5) notice of the
24 anticipated duration of the isolation, quarantine, or closure.

25 (d) The Department may order physical examinations and
26 tests and collect laboratory specimens as necessary for the
27 diagnosis or treatment of individuals in order to prevent the
28 probable spread of a dangerously contagious or infectious
29 disease. Physical examinations, tests, or collection of
30 laboratory specimens must not be such as are reasonably likely
31 to lead to serious harm to the affected individual. To prevent
32 the spread of a dangerously contagious or infectious disease,
33 the Department may, pursuant to the provisions of subsection
34 (c) of this Section, isolate or quarantine any person whose

1 refusal of physical examination or testing or collection of
2 laboratory specimens results in uncertainty regarding whether
3 he or she has been exposed to or is infected with a dangerously
4 contagious or infectious disease or otherwise poses a danger to
5 the public's health. An individual may refuse to consent to a
6 physical examination, test, or collection of laboratory
7 specimens. An individual shall be given a written notice that
8 shall include notice of the following: (i) that the individual
9 may refuse to consent to physical examination, test, or
10 collection of laboratory specimens; (ii) that if the individual
11 consents to physical examination, tests, or collection of
12 laboratory specimens, the results of that examination, test, or
13 collection of laboratory specimens may subject the individual
14 to isolation or quarantine pursuant to the provisions of
15 subsection (c) of this Section; (iii) that if the individual
16 refuses to consent to physical examination, tests, or
17 collection of laboratory specimens and that refusal results in
18 uncertainty regarding whether he or she has been exposed to or
19 is infected with a dangerously contagious or infectious disease
20 or otherwise poses a danger to the public's health, the
21 individual may be subject to isolation or quarantine pursuant
22 to the provisions of subsection (c) of this Section; and (iv)
23 that if the individual refuses to consent to physical
24 examinations, tests, or collection of laboratory specimens and
25 becomes subject to isolation and quarantine as provided in this
26 subsection (d), he or she shall have the right to counsel
27 pursuant to the provisions of subsection (c) of this Section.
28 To the extent feasible without endangering the public's health,
29 the Department shall respect and accommodate the religious
30 beliefs of individuals in implementing this subsection.

31 (e) The Department may order the administration of
32 vaccines, medications, or other treatments to persons as
33 necessary in order to prevent the probable spread of a
34 dangerously contagious or infectious disease. A vaccine,

1 medication, or other treatment to be administered must not be
2 such as is reasonably likely to lead to serious harm to the
3 affected individual. To prevent the spread of a dangerously
4 contagious or infectious disease, the Department may, pursuant
5 to the provisions of subsection (c) of this Section, isolate or
6 quarantine persons who are unable or unwilling to receive
7 vaccines, medications, or other treatments pursuant to this
8 Section. An individual may refuse to receive vaccines,
9 medications, or other treatments. An individual shall be given
10 a written notice that shall include notice of the following:
11 (i) that the individual may refuse to consent to vaccines,
12 medications, or other treatments; (ii) that if the individual
13 refuses to receive vaccines, medications, or other treatments,
14 the individual may be subject to isolation or quarantine
15 pursuant to the provisions of subsection (c) of this Section;
16 and (iii) that if the individual refuses to receive vaccines,
17 medications, or other treatments and becomes subject to
18 isolation or quarantine as provided in this subsection (e), he
19 or she shall have the right to counsel pursuant to the
20 provisions of subsection (c) of this Section. To the extent
21 feasible without endangering the public's health, the
22 Department shall respect and accommodate the religious beliefs
23 of individuals in implementing this subsection.

24 (f) The Department may order observation and monitoring of
25 persons to prevent the probable spread of a dangerously
26 contagious or infectious disease. To prevent the spread of a
27 dangerously contagious or infectious disease, the Department
28 may, pursuant to the provisions of subsection (c) of this
29 Section, isolate or quarantine persons whose refusal to undergo
30 observation and monitoring results in uncertainty regarding
31 whether he or she has been exposed to or is infected with a
32 dangerously contagious or infectious disease or otherwise
33 poses a danger to the public's health. An individual may refuse
34 to undergo observation and monitoring. An individual shall be

1 given written notice that shall include notice of the
2 following: (i) that the individual may refuse to undergo
3 observation and monitoring; (ii) that if the individual
4 consents to observation and monitoring, the results of that
5 observation and monitoring may subject the individual to
6 isolation or quarantine pursuant to the provisions of
7 subsection (c) of this Section; (iii) that if the individual
8 refuses to undergo observation and monitoring and that refusal
9 results in uncertainty regarding whether he or she has been
10 exposed to or is infected with a dangerously contagious or
11 infectious disease or otherwise poses a danger to the public's
12 health, the individual may be subject to isolation or
13 quarantine pursuant to the provisions of subsection (c) of this
14 Section; and (iv) that if the individual refuses to undergo
15 observation and monitoring and becomes subject to isolation or
16 quarantine as provided in this subsection (f), he or she shall
17 have the right to counsel pursuant to the provisions of
18 subsection (c) of this Section.

19 (g) To prevent the spread of a dangerously contagious or
20 infectious disease among humans, the Department may examine,
21 test, disinfect, seize, or destroy animals or other related
22 property believed to be sources of infection. An owner of such
23 animal or other related property shall be given written notice
24 regarding such examination, testing, disinfection, seizure, or
25 destruction. When the Department determines that any animal or
26 related property is infected with or has been exposed to a
27 dangerously contagious or infectious disease, it may agree with
28 the owner upon the value of the animal or of any related
29 property that it may be found necessary to destroy, and in case
30 such an agreement cannot be made, the animals or related
31 property shall be appraised by 3 competent and disinterested
32 appraisers, one to be selected by the Department, one by the
33 claimant, and one by the 2 appraisers thus selected. The
34 appraisers shall subscribe to an oath made in writing to fairly

1 value the animals or related property in accordance with the
2 requirements of this Act. The oath, together with the valuation
3 fixed by the appraisers, shall be filed with the Department and
4 preserved by it. Upon the appraisal being made, the owner or
5 the Department shall immediately destroy the animals by "humane
6 euthanasia" as that term is defined in Section 2.09 of the
7 Humane Care for Animals Act. Dogs and cats, however, shall be
8 euthanized pursuant to the provisions of the Humane Euthanasia
9 in Animal Shelters Act. The owner or the Department shall
10 additionally, dispose of the carcasses, and disinfect, change,
11 or destroy the premises occupied by the animals, in accordance
12 with rules prescribed by the Department governing such
13 destruction and disinfection. Upon his or her failure so to do
14 or to cooperate with the Department, the Department shall cause
15 the animals or related property to be destroyed and disposed of
16 in the same manner, and thereupon the owner shall forfeit all
17 right to receive any compensation for the destruction of the
18 animals or related property. All final administrative
19 decisions of the Department hereunder shall be subject to
20 judicial review pursuant to the provisions of the
21 Administrative Review Law, and all amendments and
22 modifications thereof, and the rules adopted pursuant thereto.
23 The term "administrative decision" is defined as in Section
24 3-101 of the Code of Civil Procedure.

25 (h) To prevent the spread of a dangerously contagious or
26 infectious disease, the Department, local boards of health, and
27 local public health authorities shall have emergency access to
28 medical or health information or records or data upon the
29 condition that the Department, local boards of health, and
30 local public health authorities shall protect the privacy and
31 confidentiality of any medical or health information or records
32 or data obtained pursuant to this Section in accordance with
33 federal and State law. Additionally, any such medical or health
34 information or records or data shall be exempt from inspection

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

27 (i) (A) The Department, in order to prevent and control
28 disease, injury, or disability among citizens of the State
29 of Illinois, may develop and implement, in consultation
30 with local public health authorities, a Statewide system
31 for syndromic data collection through the access to
32 interoperable networks, information exchanges, and
33 databases. The Department may also develop a system for the
34 reporting of comprehensive, integrated data to identify

1 and address unusual occurrences of disease symptoms and
2 other medical complexes affecting the public's health.

3 (B) The Department may enter into contracts or
4 agreements with individuals, corporations, hospitals,
5 universities, not-for-profit corporations, governmental
6 entities, or other organizations, whereby those
7 individuals or entities agree to provide assistance in the
8 compilation of the syndromic data collection and reporting
9 system.

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

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

29 (j) ~~(d)~~ This Section shall be considered supplemental to
30 the existing authority and powers of the Department and shall
31 not be construed to restrain or restrict the Department in
32 protecting the public health under any other provisions of the
33 law.

34 (k) ~~(e)~~ Any person who knowingly or maliciously

1 disseminates any false information or report concerning the
2 existence of any dangerously contagious or infectious disease
3 in connection with the Department's power of quarantine,
4 isolation and closure or refuses to comply with a quarantine,
5 isolation or closure order is guilty of a Class A misdemeanor.

6 (1) ~~(f)~~ The Department of Public Health may establish and
7 maintain a chemical and bacteriologic laboratory for the
8 examination of water and wastes, and for the diagnosis of
9 diphtheria, typhoid fever, tuberculosis, malarial fever and
10 such other diseases as it deems necessary for the protection of
11 the public health.

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

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

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

22 (20 ILCS 2305/2.1 new)

23 Sec. 2.1. Information sharing.

24 (a) Whenever a State or local law enforcement authority
25 learns of a case of an illness, health condition, or unusual
26 disease or symptom cluster, reportable pursuant to rules
27 adopted by the Department or by a local board of health or
28 local public health authority, or a suspicious event that may
29 be the cause of or related to a public health emergency, as
30 that term is defined in Section 4 of the Illinois Emergency
31 Management Agency Act, it shall immediately notify the Illinois
32 Emergency Management Agency and the Department or local board
33 of health or local public health authority.

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

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

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

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

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

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

26 (20 ILCS 2310/2310-5)

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

28 "Department" means the Department of Public Health.

29 "Director" means the Director of Public Health.

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

32 (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.

1 (20 ILCS 2310/2310-615 new)

2 Sec. 2310-615. Department coordination; public health
3 preparedness. The Department shall require and coordinate
4 development and implementation of public health preparedness
5 and response plans by local health departments and facilities
6 licensed by the Department.

7 (20 ILCS 2310/2310-620 new)

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

14 (20 ILCS 2310/2310-625 new)

15 Sec. 2310-625. Emergency Powers.

16 (a) Upon proclamation of a disaster by the Governor, as
17 provided for in the Illinois Emergency Management Agency Act,
18 the Director of Public Health shall have the following powers,
19 which shall be exercised only in coordination with the Illinois
20 Emergency Management Agency and the Department of Professional
21 Regulation:

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

28 (2) The power to modify the scope of practice
29 restrictions under the Emergency Medical Services (EMS)
30 Systems Act for any persons who are licensed under that Act
31 for any person working under the direction of the Illinois
32 Emergency Management Agency and the Illinois Department of

1 Public Health pursuant to the declared disaster.

2 (3) The power to modify the scope of practice
3 restrictions under the Nursing Home Care Act for Certified
4 Nursing Assistants for any person working under the
5 direction of the Illinois Emergency Management Agency and
6 the Illinois Department of Public Health pursuant to the
7 declared disaster.

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

15 (c) The Director shall exercise these powers by way of
16 proclamation.

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

19 (210 ILCS 25/7-102) (from Ch. 111 1/2, par. 627-102)

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

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

31 Section 25. The Emergency Medical Services (EMS) Systems

1 Act is amended by adding Section 3.255 as follows:

2 (210 ILCS 50/3.255 new)

3 Sec. 3.255. Emergency Medical Disaster Plan. The
4 Department shall develop and implement an Emergency Medical
5 Disaster Plan to assist emergency medical services personnel
6 and health care facilities in working together in a
7 collaborative way and to provide support in situations where
8 local medical resources are overwhelmed, including but not
9 limited to public health emergencies, as that term is defined
10 in Section 4 of the Illinois Emergency Management Agency Act.
11 As part of the plan, the Department may designate lead
12 hospitals in each Emergency Medical Services region
13 established under this Act and may foster the creation and
14 coordination of volunteer medical response teams that can be
15 deployed to assist when a locality's capacity is overwhelmed.
16 In developing an Emergency Medical Disaster Plan, the
17 Department shall collaborate with the entities listed in
18 Sections 2310-50.5 and 2310-620 of the Department of Public
19 Health Powers and Duties Law of the Civil Administrative Code
20 of Illinois.

21 Section 30. The Hospital Licensing Act is amended by
22 changing Section 10.4 as follows:

23 (210 ILCS 85/10.4) (from Ch. 111 1/2, par. 151.4)

24 Sec. 10.4. Medical staff privileges.

25 (a) Any hospital licensed under this Act or any hospital
26 organized under the University of Illinois Hospital Act shall,
27 prior to the granting of any medical staff privileges to an
28 applicant, or renewing a current medical staff member's
29 privileges, request of the Director of Professional Regulation
30 information concerning the licensure status and any
31 disciplinary action taken against the applicant's or medical

1 staff member's license, except: (1) for medical personnel who
2 enter a hospital to obtain organs and tissues for transplant
3 from a deceased donor in accordance with the Uniform Anatomical
4 Gift Act; or (2) for medical personnel who have been granted
5 disaster privileges pursuant to the procedures and
6 requirements established by rules adopted by the Department.
7 Any hospital and any employees of the hospital or others
8 involved in granting privileges that, in good faith, grants
9 disaster privileges pursuant to this Section to respond to an
10 emergency shall not, as a result of his, her, or its acts or
11 omissions, be liable for civil damages for granting or denying
12 disaster privileges except in the event of willful and wanton
13 misconduct, as that term is defined in Section 10.2 of this
14 Act. Individuals granted privileges who provide care in an
15 emergency situation, in good faith and without direct
16 compensation, shall not, as a result of his or her acts or
17 omissions, except for acts or omissions involving willful and
18 wanton misconduct, as that term is defined in Section 10.2 of
19 this Act, on the part of the person, be liable for civil
20 damages. The Director of Professional Regulation shall
21 transmit, in writing and in a timely fashion, such information
22 regarding the license of the applicant or the medical staff
23 member, including the record of imposition of any periods of
24 supervision or monitoring as a result of alcohol or substance
25 abuse, as provided by Section 23 of the Medical Practice Act of
26 1987, and such information as may have been submitted to the
27 Department indicating that the application or medical staff
28 member has been denied, or has surrendered, medical staff
29 privileges at a hospital licensed under this Act, or any
30 equivalent facility in another state or territory of the United
31 States. The Director of Professional Regulation shall define by
32 rule the period for timely response to such requests.

33 No transmittal of information by the Director of
34 Professional Regulation, under this Section shall be to other

1 than the president, chief operating officer, chief
2 administrative officer, or chief of the medical staff of a
3 hospital licensed under this Act, a hospital organized under
4 the University of Illinois Hospital Act, or a hospital operated
5 by the United States, or any of its instrumentalities. The
6 information so transmitted shall be afforded the same status as
7 is information concerning medical studies by Part 21 of Article
8 VIII of the Code of Civil Procedure, as now or hereafter
9 amended.

10 (b) All hospitals licensed under this Act, except county
11 hospitals as defined in subsection (c) of Section 15-1 of the
12 Illinois Public Aid Code, shall comply with, and the medical
13 staff bylaws of these hospitals shall include rules consistent
14 with, the provisions of this Section in granting, limiting,
15 renewing, or denying medical staff membership and clinical
16 staff privileges. Hospitals that require medical staff members
17 to possess faculty status with a specific institution of higher
18 education are not required to comply with subsection (1) below
19 when the physician does not possess faculty status.

20 (1) Minimum procedures for pre-applicants and
21 applicants for medical staff membership shall include the
22 following:

23 (A) Written procedures relating to the acceptance
24 and processing of pre-applicants or applicants for
25 medical staff membership, which should be contained in
26 medical staff bylaws.

27 (B) Written procedures to be followed in
28 determining a pre-applicant's or an applicant's
29 qualifications for being granted medical staff
30 membership and privileges.

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

33 (D) An evaluation of a pre-applicant's or an
34 applicant's current health status and current license

1 status in Illinois.

2 (E) A written response to each pre-applicant or
3 applicant that explains the reason or reasons for any
4 adverse decision (including all reasons based in whole
5 or in part on the applicant's medical qualifications or
6 any other basis, including economic factors).

7 (2) Minimum procedures with respect to medical staff
8 and clinical privilege determinations concerning current
9 members of the medical staff shall include the following:

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

11 (B) An explanation of the reasons for an adverse
12 decision including all reasons based on the quality of
13 medical care or any other basis, including economic
14 factors.

15 (C) A statement of the medical staff member's right
16 to request a fair hearing on the adverse decision
17 before a hearing panel whose membership is mutually
18 agreed upon by the medical staff and the hospital
19 governing board. The hearing panel shall have
20 independent authority to recommend action to the
21 hospital governing board. Upon the request of the
22 medical staff member or the hospital governing board,
23 the hearing panel shall make findings concerning the
24 nature of each basis for any adverse decision
25 recommended to and accepted by the hospital governing
26 board.

27 (i) Nothing in this subparagraph (C) limits a
28 hospital's or medical staff's right to summarily
29 suspend, without a prior hearing, a person's
30 medical staff membership or clinical privileges if
31 the continuation of practice of a medical staff
32 member constitutes an immediate danger to the
33 public, including patients, visitors, and hospital
34 employees and staff. A fair hearing shall be

1 commenced within 15 days after the suspension and
2 completed without delay.

3 (ii) Nothing in this subparagraph (C) limits a
4 medical staff's right to permit, in the medical
5 staff bylaws, summary suspension of membership or
6 clinical privileges in designated administrative
7 circumstances as specifically approved by the
8 medical staff. This bylaw provision must
9 specifically describe both the administrative
10 circumstance that can result in a summary
11 suspension and the length of the summary
12 suspension. The opportunity for a fair hearing is
13 required for any administrative summary
14 suspension. Any requested hearing must be
15 commenced within 15 days after the summary
16 suspension and completed without delay. Adverse
17 decisions other than suspension or other
18 restrictions on the treatment or admission of
19 patients may be imposed summarily and without a
20 hearing under designated administrative
21 circumstances as specifically provided for in the
22 medical staff bylaws as approved by the medical
23 staff.

24 (iii) If a hospital exercises its option to
25 enter into an exclusive contract and that contract
26 results in the total or partial termination or
27 reduction of medical staff membership or clinical
28 privileges of a current medical staff member, the
29 hospital shall provide the affected medical staff
30 member 60 days prior notice of the effect on his or
31 her medical staff membership or privileges. An
32 affected medical staff member desiring a hearing
33 under subparagraph (C) of this paragraph (2) must
34 request the hearing within 14 days after the date

1 he or she is so notified. The requested hearing
2 shall be commenced and completed (with a report and
3 recommendation to the affected medical staff
4 member, hospital governing board, and medical
5 staff) within 30 days after the date of the medical
6 staff member's request. If agreed upon by both the
7 medical staff and the hospital governing board,
8 the medical staff bylaws may provide for longer
9 time periods.

10 (D) A statement of the member's right to inspect
11 all pertinent information in the hospital's possession
12 with respect to the decision.

13 (E) A statement of the member's right to present
14 witnesses and other evidence at the hearing on the
15 decision.

16 (F) A written notice and written explanation of the
17 decision resulting from the hearing.

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

20 (G) Notice given 15 days before implementation of
21 an adverse medical staff membership or clinical
22 privileges decision based substantially on economic
23 factors. This notice shall be given after the medical
24 staff member exhausts all applicable procedures under
25 this Section, including item (iii) of subparagraph (C)
26 of this paragraph (2), and under the medical staff
27 bylaws in order to allow sufficient time for the
28 orderly provision of patient care.

29 (H) Nothing in this paragraph (2) of this
30 subsection (b) limits a medical staff member's right to
31 waive, in writing, the rights provided in
32 subparagraphs (A) through (G) of this paragraph (2) of
33 this subsection (b) upon being granted the written
34 exclusive right to provide particular services at a

1 hospital, either individually or as a member of a
2 group. If an exclusive contract is signed by a
3 representative of a group of physicians, a waiver
4 contained in the contract shall apply to all members of
5 the group unless stated otherwise in the contract.

6 (3) Every adverse medical staff membership and
7 clinical privilege decision based substantially on
8 economic factors shall be reported to the Hospital
9 Licensing Board before the decision takes effect. These
10 reports shall not be disclosed in any form that reveals the
11 identity of any hospital or physician. These reports shall
12 be utilized to study the effects that hospital medical
13 staff membership and clinical privilege decisions based
14 upon economic factors have on access to care and the
15 availability of physician services. The Hospital Licensing
16 Board shall submit an initial study to the Governor and the
17 General Assembly by January 1, 1996, and subsequent reports
18 shall be submitted periodically thereafter.

19 (4) As used in this Section:

20 "Adverse decision" means a decision reducing,
21 restricting, suspending, revoking, denying, or not
22 renewing medical staff membership or clinical privileges.

23 "Economic factor" means any information or reasons for
24 decisions unrelated to quality of care or professional
25 competency.

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

29 "Privilege" means permission to provide medical or
30 other patient care services and permission to use hospital
31 resources, including equipment, facilities and personnel
32 that are necessary to effectively provide medical or other
33 patient care services. This definition shall not be
34 construed to require a hospital to acquire additional

1 equipment, facilities, or personnel to accommodate the
2 granting of privileges.

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

6 (c) All hospitals shall consult with the medical staff
7 prior to closing membership in the entire or any portion of the
8 medical staff or a department. If the hospital closes
9 membership in the medical staff, any portion of the medical
10 staff, or the department over the objections of the medical
11 staff, then the hospital shall provide a detailed written
12 explanation for the decision to the medical staff 10 days prior
13 to the effective date of any closure. No applications need to
14 be provided when membership in the medical staff or any
15 relevant portion of the medical staff is closed.

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

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

20 (410 ILCS 517/15)

21 Sec. 15. Development and use of uniform health care and
22 hospital credentials forms.

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

25 (1) a uniform health care credentials form that shall
26 include the credentials data commonly requested by health
27 care entities and health care plans for purposes of
28 credentialing and shall minimize the need for the
29 collection of additional credentials data;

30 (2) a uniform health care recredentials form that shall
31 include the credentials data commonly requested by health
32 care entities and health care plans for purposes of

1 recredialing and shall minimize the need for the
2 collection of additional credentials data;

3 (3) a uniform hospital credentials form that shall
4 include the credentials data commonly requested by
5 hospitals for purposes of credentialing and shall minimize
6 the need for the collection of additional credentials data;

7 (4) a uniform hospital recredentials form that shall
8 include the credentials data commonly requested by
9 hospitals for purposes of recredentialing and shall
10 minimize the need for collection of additional credentials
11 data; and

12 (5) uniform updating forms.

13 (b) The uniform forms established in subsection (a) shall
14 be coordinated to reduce the need to provide redundant
15 information. Further, the forms shall be made available in both
16 paper and electronic formats.

17 (c) The Department, in consultation with the council, shall
18 establish by rule a date after which an electronic format may
19 be required by a health care entity, a health care plan, or a
20 hospital, and a health care professional may require acceptance
21 of an electronic format by a health care entity, a health care
22 plan, or a hospital.

23 (d) Beginning January 1, 2002, each health care entity or
24 health care plan that employs, contracts with, or allows health
25 care professionals to provide medical or health care services
26 and requires health care professionals to be credentialed or
27 recredialled shall for purposes of collecting credentials
28 data only require:

29 (1) the uniform health care credentials form;

30 (2) the uniform health care recredentials form;

31 (3) the uniform updating forms; and

32 (4) any additional credentials data requested.

33 (e) Beginning January 1, 2002, each hospital that employs,
34 contracts with, or allows health care professionals to provide

1 medical or health care services and requires health care
2 professionals to be credentialed or recredentialed shall for
3 purposes of collecting credentials data only require:

- 4 (1) the uniform hospital credentials form;
- 5 (2) the uniform hospital recredentials form;
- 6 (3) the uniform updating forms; and
- 7 (4) any additional credentials data requested.

8 (f) Each health care entity and health care plan shall
9 complete the process of verifying a health care professional's
10 credentials data in a timely fashion and shall complete the
11 process of credentialing or recredentialing of the health care
12 professional within 60 days after submission of all credentials
13 data and completion of verification of the credentials data.

14 (g) Each health care professional shall provide any
15 corrections, updates, and modifications to his or her
16 credentials data to ensure that all credentials data on the
17 health care professional remains current. Such corrections,
18 updates, and modifications shall be provided within 5 business
19 days for State health care professional license revocation,
20 federal Drug Enforcement Agency license revocation, Medicare
21 or Medicaid sanctions, revocation of hospital privileges, any
22 lapse in professional liability coverage required by a health
23 care entity, health care plan, or hospital, or conviction of a
24 felony, and within 45 days for any other change in the
25 information from the date the health care professional knew of
26 the change. All updates shall be made on the uniform updating
27 forms developed by the Department.

28 (h) Any credentials data collected or obtained by the
29 health care entity, health care plan, or hospital shall be
30 confidential, as provided by law, and otherwise may not be
31 redisclosed without written consent of the health care
32 professional, except that in any proceeding to challenge
33 credentialing or recredentialing, or in any judicial review,
34 the claim of confidentiality shall not be invoked to deny a

1 health care professional, health care entity, health care plan,
2 or hospital access to or use of credentials data. Nothing in
3 this Section prevents a health care entity, health care plan,
4 or hospital from disclosing any credentials data to its
5 officers, directors, employees, agents, subcontractors,
6 medical staff members, any committee of the health care entity,
7 health care plan, or hospital involved in the credentialing
8 process, or accreditation bodies or licensing agencies.
9 However, any redisclosure of credentials data contrary to this
10 Section is prohibited.

11 (i) Nothing in this Act shall be construed to restrict the
12 right of any health care entity, health care plan or hospital
13 to request additional information necessary for credentialing
14 or recredentialing.

15 (j) Nothing in this Act shall be construed to restrict in
16 any way the authority of any health care entity, health care
17 plan or hospital to approve, suspend or deny an application for
18 hospital staff membership, clinical privileges, or managed
19 care network participation.

20 (k) Nothing in this Act shall be construed to prohibit
21 delegation of credentialing and recredentialing activities as
22 long as the delegated entity follows the requirements set forth
23 in this Act.

24 (l) Nothing in this Act shall be construed to require any
25 health care entity or health care plan to credential or survey
26 any health care professional.

27 (m) Nothing in this Act prohibits a hospital from granting
28 disaster privileges pursuant to the provisions of Section 10.4
29 of the Hospital Licensing Act. When a hospital grants disaster
30 privileges pursuant to Section 10.4 of the Hospital Licensing
31 Act, that hospital is not required to collect credentials data
32 pursuant to this Act.

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

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

3 (625 ILCS 5/1-105) (from Ch. 95 1/2, par. 1-105)

4 Sec. 1-105. Authorized emergency vehicle. Emergency
5 vehicles of municipal departments or public service
6 corporations as are designated or authorized by proper local
7 authorities; police vehicles; vehicles of the fire department;
8 ambulances; vehicles of the Illinois Emergency Management
9 Agency; vehicles of the Illinois Department of Public Health;
10 and vehicles of the Department of Nuclear Safety.

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

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

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

15 (a) The use of red or white oscillating, rotating or
16 flashing lights, whether lighted or unlighted, is prohibited
17 except on:

18 1. Law enforcement vehicles of State, Federal or local
19 authorities;

20 2. A vehicle operated by a police officer or county
21 coroner and designated or authorized by local authorities,
22 in writing, as a law enforcement vehicle; however, such
23 designation or authorization must be carried in the
24 vehicle;

25 3. Vehicles of local fire departments and State or
26 federal firefighting vehicles;

27 4. Vehicles which are designed and used exclusively as
28 ambulances or rescue vehicles; furthermore, such lights
29 shall not be lighted except when responding to an emergency
30 call for and while actually conveying the sick or injured;

31 5. Tow trucks licensed in a state that requires such
32 lights; furthermore, such lights shall not be lighted on

1 any such tow truck while the tow truck is operating in the
2 State of Illinois;

3 6. Vehicles of the Illinois Emergency Management
4 Agency, vehicles of the Illinois Department of Public
5 Health, and vehicles of the Department of Nuclear Safety;

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

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

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

13 1. Second division vehicles designed and used for
14 towing or hoisting vehicles; furthermore, such lights
15 shall not be lighted except as required in this paragraph
16 1; such lights shall be lighted when such vehicles are
17 actually being used at the scene of an accident or
18 disablement; if the towing vehicle is equipped with a flat
19 bed that supports all wheels of the vehicle being
20 transported, the lights shall not be lighted while the
21 vehicle is engaged in towing on a highway; if the towing
22 vehicle is not equipped with a flat bed that supports all
23 wheels of a vehicle being transported, the lights shall be
24 lighted while the towing vehicle is engaged in towing on a
25 highway during all times when the use of headlights is
26 required under Section 12-201 of this Code;

27 2. Motor vehicles or equipment of the State of
28 Illinois, local authorities and contractors; furthermore,
29 such lights shall not be lighted except while such vehicles
30 are engaged in maintenance or construction operations
31 within the limits of construction projects;

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

1 highway;

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

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

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

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

19 8. Such other vehicles as may be authorized by local
20 authorities;

21 9. Law enforcement vehicles of State or local
22 authorities when used in combination with red oscillating,
23 rotating or flashing lights;

24 9.5. Propane delivery trucks;

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

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

31 12. All trucks equipped with self-compactors or
32 roll-off hoists and roll-on containers for garbage or
33 refuse hauling. Such lights shall not be lighted except
34 when such vehicles are actually being used for such

1 purposes;

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

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

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

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

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

16 voluntary firefighter;

17 paid firefighter;

18 part-paid firefighter;

19 call firefighter;

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

22 paid or unpaid member of a rescue squad;

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

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

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

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

1 3. Law enforcement vehicles of State or local
2 authorities when used in combination with red oscillating,
3 rotating or flashing lights.

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

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

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

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

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

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

34 (c-2) In addition to the blue oscillating, rotating, or

1 flashing lights permitted under subsection (c), and
2 notwithstanding subsection (a), a vehicle operated by a paid or
3 unpaid member of a local or county emergency management
4 services agency as defined in the Illinois Emergency Management
5 Agency Act, may be equipped with white oscillating, rotating,
6 or flashing lights to be used in combination with blue
7 oscillating, rotating, or flashing lights, if authorization by
8 local authorities is in writing and carried in the vehicle.

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

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

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

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

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

1 (Source: P.A. 92-138, eff. 7-24-01; 92-407, eff. 8-17-01;
2 92-651, eff. 7-11-02; 92-782, eff. 8-6-02; 92-820, eff.
3 8-21-02; 92-872, eff. 6-1-03; 93-181, eff. 1-1-04.)

4 Section 45. The Communicable Disease Report Act is amended
5 by changing Section 1 as follows:

6 (745 ILCS 45/1) (from Ch. 126, par. 21)

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

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

1 approved June 26, 1975, as now or hereafter amended.

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

6 Nothing in this Act prohibits the sharing of information as
7 authorized in Section 2.1 of the Department of Public Health
8 Act.

9 (Source: P.A. 89-187, eff. 7-19-95; 89-381, eff. 8-18-95;
10 89-477, eff. 6-18-96; 89-626, eff. 8-9-96.)

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

13 (820 ILCS 305/11) (from Ch. 48, par. 138.11)

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

25 Accidental injuries incurred while participating in
26 voluntary recreational programs including but not limited to
27 athletic events, parties and picnics do not arise out of and in
28 the course of the employment even though the employer pays some
29 or all of the cost thereof. This exclusion shall not apply in
30 the event that the injured employee was ordered or assigned by
31 his employer to participate in the program.

32 Accidental injuries incurred while participating as a

1 patient in a drug or alcohol rehabilitation program do not
2 arise out of and in the course of employment even though the
3 employer pays some or all of the costs thereof.

4 Any injury to or disease or death of an employee arising
5 from the administration of a vaccine, including without
6 limitation smallpox vaccine, to prepare for, or as a response
7 to, a threatened or potential bioterrorist incident to the
8 employee as part of a voluntary inoculation program in
9 connection with the person's employment or in connection with
10 any governmental program or recommendation for the inoculation
11 of workers in the employee's occupation, geographical area, or
12 other category that includes the employee is deemed to arise
13 out of and in the course of the employment for all purposes
14 under this Act. This paragraph added by this amendatory Act of
15 the 93rd General Assembly is declarative of existing law and is
16 not a new enactment.

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

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

20 (820 ILCS 310/1) (from Ch. 48, par. 172.36)

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

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

25 1. The State and each county, city, town, township,
26 incorporated village, school district, body politic, or
27 municipal corporation therein.

28 2. Every person, firm, public or private corporation,
29 including hospitals, public service, eleemosynary, religious
30 or charitable corporations or associations, who has any person
31 in service or under any contract for hire, express or implied,
32 oral or written.

1 3. Where an employer operating under and subject to the
2 provisions of this Act loans an employee to another such
3 employer and such loaned employee sustains a compensable
4 occupational disease in the employment of such borrowing
5 employer and where such borrowing employer does not provide or
6 pay the benefits or payments due such employee, such loaning
7 employer shall be liable to provide or pay all benefits or
8 payments due such employee under this Act and as to such
9 employee the liability of such loaning and borrowing employers
10 shall be joint and several, provided that such loaning employer
11 shall in the absence of agreement to the contrary be entitled
12 to receive from such borrowing employer full reimbursement for
13 all sums paid or incurred pursuant to this paragraph together
14 with reasonable attorneys' fees and expenses in any hearings
15 before the Industrial Commission or in any action to secure
16 such reimbursement. Where any benefit is provided or paid by
17 such loaning employer, the employee shall have the duty of
18 rendering reasonable co-operation in any hearings, trials or
19 proceedings in the case, including such proceedings for
20 reimbursement.

21 Where an employee files an Application for Adjustment of
22 Claim with the Industrial Commission alleging that his or her
23 claim is covered by the provisions of the preceding paragraph,
24 and joining both the alleged loaning and borrowing employers,
25 they and each of them, upon written demand by the employee and
26 within 7 days after receipt of such demand, shall have the duty
27 of filing with the Industrial Commission a written admission or
28 denial of the allegation that the claim is covered by the
29 provisions of the preceding paragraph and in default of such
30 filing or if any such denial be ultimately determined not to
31 have been bona fide then the provisions of Paragraph K of
32 Section 19 of this Act shall apply.

33 An employer whose business or enterprise or a substantial
34 part thereof consists of hiring, procuring or furnishing

1 employees to or for other employers operating under and subject
2 to the provisions of this Act for the performance of the work
3 of such other employers and who pays such employees their
4 salary or wage notwithstanding that they are doing the work of
5 such other employers shall be deemed a loaning employer within
6 the meaning and provisions of this Section.

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

9 1. Every person in the service of the State, county, city,
10 town, township, incorporated village or school district, body
11 politic or municipal corporation therein, whether by election,
12 appointment or contract of hire, express or implied, oral or
13 written, including any official of the State, or of any county,
14 city, town, township, incorporated village, school district,
15 body politic or municipal corporation therein and except any
16 duly appointed member of the fire department in any city whose
17 population exceeds 500,000 according to the last Federal or
18 State census, and except any member of a fire insurance patrol
19 maintained by a board of underwriters in this State. One
20 employed by a contractor who has contracted with the State, or
21 a county, city, town, township, incorporated village, school
22 district, body politic or municipal corporation therein,
23 through its representatives, shall not be considered as an
24 employee of the State, county, city, town, township,
25 incorporated village, school district, body politic or
26 municipal corporation which made the contract.

27 2. Every person in the service of another under any
28 contract of hire, express or implied, oral or written, who
29 contracts an occupational disease while working in the State of
30 Illinois, or who contracts an occupational disease while
31 working outside of the State of Illinois but where the contract
32 of hire is made within the State of Illinois, and any person
33 whose employment is principally localized within the State of
34 Illinois, regardless of the place where the disease was

1 contracted or place where the contract of hire was made,
2 including aliens, and minors who, for the purpose of this Act,
3 except Section 3 hereof, shall be considered the same and have
4 the same power to contract, receive payments and give
5 quittances therefor, as adult employees. An employee or his or
6 her dependents under this Act who shall have a cause of action
7 by reason of an occupational disease, disablement or death
8 arising out of and in the course of his or her employment may
9 elect or pursue his or her remedy in the State where the
10 disease was contracted, or in the State where the contract of
11 hire is made, or in the State where the employment is
12 principally localized.

13 (c) "Commission" means the Industrial Commission created
14 by the Workers' Compensation Act, approved July 9, 1951, as
15 amended.

16 (d) In this Act the term "Occupational Disease" means a
17 disease arising out of and in the course of the employment or
18 which has become aggravated and rendered disabling as a result
19 of the exposure of the employment. Such aggravation shall arise
20 out of a risk peculiar to or increased by the employment and
21 not common to the general public.

22 A disease shall be deemed to arise out of the employment if
23 there is apparent to the rational mind, upon consideration of
24 all the circumstances, a causal connection between the
25 conditions under which the work is performed and the
26 occupational disease. The disease need not to have been
27 foreseen or expected but after its contraction it must appear
28 to have had its origin or aggravation in a risk connected with
29 the employment and to have flowed from that source as a
30 rational consequence.

31 An employee shall be conclusively deemed to have been
32 exposed to the hazards of an occupational disease when, for any
33 length of time however short, he or she is employed in an
34 occupation or process in which the hazard of the disease

1 exists; provided however, that in a claim of exposure to atomic
2 radiation, the fact of such exposure must be verified by the
3 records of the central registry of radiation exposure
4 maintained by the Department of Public Health or by some other
5 recognized governmental agency maintaining records of such
6 exposures whenever and to the extent that the records are on
7 file with the Department of Public Health or the agency.

8 Any injury to or disease or death of an employee arising
9 from the administration of a vaccine, including without
10 limitation smallpox vaccine, to prepare for, or as a response
11 to, a threatened or potential bioterrorist incident to the
12 employee as part of a voluntary inoculation program in
13 connection with the person's employment or in connection with
14 any governmental program or recommendation for the inoculation
15 of workers in the employee's occupation, geographical area, or
16 other category that includes the employee is deemed to arise
17 out of and in the course of the employment for all purposes
18 under this Act. This paragraph added by this amendatory Act of
19 the 93rd General Assembly is declarative of existing law and is
20 not a new enactment.

21 The employer liable for the compensation in this Act
22 provided shall be the employer in whose employment the employee
23 was last exposed to the hazard of the occupational disease
24 claimed upon regardless of the length of time of such last
25 exposure, except, in cases of silicosis or asbestosis, the only
26 employer liable shall be the last employer in whose employment
27 the employee was last exposed during a period of 60 days or
28 more after the effective date of this Act, to the hazard of
29 such occupational disease, and, in such cases, an exposure
30 during a period of less than 60 days, after the effective date
31 of this Act, shall not be deemed a last exposure. If a miner
32 who is suffering or suffered from pneumoconiosis was employed
33 for 10 years or more in one or more coal mines there shall,
34 effective July 1, 1973 be a rebuttable presumption that his or

1 her pneumoconiosis arose out of such employment.

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

6 The insurance carrier liable shall be the carrier whose
7 policy was in effect covering the employer liable on the last
8 day of the exposure rendering such employer liable in
9 accordance with the provisions of this Act.

10 (e) "Disablement" means an impairment or partial
11 impairment, temporary or permanent, in the function of the body
12 or any of the members of the body, or the event of becoming
13 disabled from earning full wages at the work in which the
14 employee was engaged when last exposed to the hazards of the
15 occupational disease by the employer from whom he or she claims
16 compensation, or equal wages in other suitable employment; and
17 "disability" means the state of being so incapacitated.

18 (f) No compensation shall be payable for or on account of
19 any occupational disease unless disablement, as herein
20 defined, occurs within two years after the last day of the last
21 exposure to the hazards of the disease, except in cases of
22 occupational disease caused by berylliosis or by the inhalation
23 of silica dust or asbestos dust and, in such cases, within 3
24 years after the last day of the last exposure to the hazards of
25 such disease and except in the case of occupational disease
26 caused by exposure to radiological materials or equipment, and
27 in such case, within 25 years after the last day of last
28 exposure to the hazards of such disease.

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

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

32 (5 ILCS 100/5-45) (from Ch. 127, par. 1005-45)

1 Sec. 5-45. Emergency rulemaking.

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

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

22 (c) An emergency rule may be effective for a period of not
23 longer than 150 days, but the agency's authority to adopt an
24 identical rule under Section 5-40 is not precluded. No
25 emergency rule may be adopted more than once in any 24 month
26 period, except that this limitation on the number of emergency
27 rules that may be adopted in a 24 month period does not apply
28 to (i) emergency rules that make additions to and deletions
29 from the Drug Manual under Section 5-5.16 of the Illinois
30 Public Aid Code or the generic drug formulary under Section
31 3.14 of the Illinois Food, Drug and Cosmetic Act ~~and~~ (ii)
32 emergency rules adopted by the Pollution Control Board before
33 July 1, 1997 to implement portions of the Livestock Management
34 Facilities Act; or (iii) emergency rules adopted by the

1 Illinois Department of Public Health under subsections (a)
2 through (i) of Section 2 of the Department of Public Health Act
3 when necessary to protect the public's health. Two or more
4 emergency rules having substantially the same purpose and
5 effect shall be deemed to be a single rule for purposes of this
6 Section.

7 (d) In order to provide for the expeditious and timely
8 implementation of the State's fiscal year 1999 budget,
9 emergency rules to implement any provision of Public Act 90-587
10 or 90-588 or any other budget initiative for fiscal year 1999
11 may be adopted in accordance with this Section by the agency
12 charged with administering that provision or initiative,
13 except that the 24-month limitation on the adoption of
14 emergency rules and the provisions of Sections 5-115 and 5-125
15 do not apply to rules adopted under this subsection (d). The
16 adoption of emergency rules authorized by this subsection (d)
17 shall be deemed to be necessary for the public interest,
18 safety, and welfare.

19 (e) In order to provide for the expeditious and timely
20 implementation of the State's fiscal year 2000 budget,
21 emergency rules to implement any provision of this amendatory
22 Act of the 91st General Assembly or any other budget initiative
23 for fiscal year 2000 may be adopted in accordance with this
24 Section by the agency charged with administering that provision
25 or initiative, except that the 24-month limitation on the
26 adoption of emergency rules and the provisions of Sections
27 5-115 and 5-125 do not apply to rules adopted under this
28 subsection (e). The adoption of emergency rules authorized by
29 this subsection (e) shall be deemed to be necessary for the
30 public interest, safety, and welfare.

31 (f) In order to provide for the expeditious and timely
32 implementation of the State's fiscal year 2001 budget,
33 emergency rules to implement any provision of this amendatory
34 Act of the 91st General Assembly or any other budget initiative

1 for fiscal year 2001 may be adopted in accordance with this
2 Section by the agency charged with administering that provision
3 or initiative, except that the 24-month limitation on the
4 adoption of emergency rules and the provisions of Sections
5 5-115 and 5-125 do not apply to rules adopted under this
6 subsection (f). The adoption of emergency rules authorized by
7 this subsection (f) shall be deemed to be necessary for the
8 public interest, safety, and welfare.

9 (g) In order to provide for the expeditious and timely
10 implementation of the State's fiscal year 2002 budget,
11 emergency rules to implement any provision of this amendatory
12 Act of the 92nd General Assembly or any other budget initiative
13 for fiscal year 2002 may be adopted in accordance with this
14 Section by the agency charged with administering that provision
15 or initiative, except that the 24-month limitation on the
16 adoption of emergency rules and the provisions of Sections
17 5-115 and 5-125 do not apply to rules adopted under this
18 subsection (g). The adoption of emergency rules authorized by
19 this subsection (g) shall be deemed to be necessary for the
20 public interest, safety, and welfare.

21 (h) In order to provide for the expeditious and timely
22 implementation of the State's fiscal year 2003 budget,
23 emergency rules to implement any provision of this amendatory
24 Act of the 92nd General Assembly or any other budget initiative
25 for fiscal year 2003 may be adopted in accordance with this
26 Section by the agency charged with administering that provision
27 or initiative, except that the 24-month limitation on the
28 adoption of emergency rules and the provisions of Sections
29 5-115 and 5-125 do not apply to rules adopted under this
30 subsection (h). The adoption of emergency rules authorized by
31 this subsection (h) shall be deemed to be necessary for the
32 public interest, safety, and welfare.

33 (i) In order to provide for the expeditious and timely
34 implementation of the State's fiscal year 2004 budget,

1 emergency rules to implement any provision of this amendatory
2 Act of the 93rd General Assembly or any other budget initiative
3 for fiscal year 2004 may be adopted in accordance with this
4 Section by the agency charged with administering that provision
5 or initiative, except that the 24-month limitation on the
6 adoption of emergency rules and the provisions of Sections
7 5-115 and 5-125 do not apply to rules adopted under this
8 subsection (i). The adoption of emergency rules authorized by
9 this subsection (i) shall be deemed to be necessary for the
10 public interest, safety, and welfare.

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

13 Section 99. Effective date. This Act takes effect upon
14 becoming law."