



93RD GENERAL ASSEMBLY
State of Illinois
2003 and 2004

Introduced 02/09/04, by Sara Feigenholtz

SYNOPSIS AS INTRODUCED:

20 ILCS 2310/2310-353 new

Amends the Department of Public Health Powers and Duties Law of the Civil Administrative Code of Illinois. Creates the Cervical Cancer Elimination Task Force within the Department of Public Health. Requires the task force to examine the prevalence and burden of cervical cancer, raise public awareness concerning the causes and nature of cervical cancer, identify prevention and control strategies and technologies, and perform other functions. Requires the task force to develop a statewide comprehensive cervical cancer prevention plan and to make annual reports. Provides for expiration of the task force on April 1, 2009 or upon the task force's submission of its final report, whichever is earlier.

LRB093 19296 DRJ 45031 b

FISCAL NOTE ACT
MAY APPLY

1 AN ACT concerning 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 Public Health Powers and
5 Duties Law of the Civil Administrative Code of Illinois is
6 amended by adding Section 2310-353 as follows:

7 (20 ILCS 2310/2310-353 new)

8 Sec. 2310-353. Cervical Cancer Elimination Task Force.

9 (a) A standing ad hoc task force on cervical cancer
10 elimination is established within the Department of Public
11 Health. The task force shall be called the Cervical Cancer
12 Elimination Task Force ("the Task Force"). The Task Force shall
13 perform the duties specified in this Section.

14 (b) The Task Force shall have 23 members. The directors of
15 Public Health, Public Aid, and Human Services and the Chair and
16 Vice-Chair of the Conference of Women Legislators in Illinois,
17 or their designees, shall be ex officio members of the Task
18 Force. The following additional members shall be appointed:

19 (1) By the President of the Senate, as follows:

20 (A) One member of the Senate.

21 (B) Two representatives of the Conference of Women
22 Legislators in Illinois.

23 (C) A representative of a women's health
24 organization.

25 (D) A representative from the American Academy of
26 Pediatrics.

27 (E) A certified schoolteacher.

28 (2) By the Speaker of the House of Representatives, as
29 follows:

30 (A) One member of the House of Representatives.

31 (B) Two representatives of the Conference of Women
32 Legislators in Illinois.

1 (C) A member of the Illinois Chapter of the
2 American Cancer Society.

3 (D) A member of the health insurance industry.

4 (E) A member from the American College of
5 Obstetrics and Gynecology.

6 (3) By the Governor, as follows:

7 (A) A member of the American Academy of Family
8 Physicians.

9 (B) The State Epidemiologist.

10 (C) Two members at large.

11 (D) A news director of a newspaper or television or
12 radio station.

13 (E) A licensed registered nurse.

14 The Governor shall appoint a Chair from among the members
15 of the Task Force. The Task Force shall elect a Vice-Chair from
16 its members.

17 (c) Each appointing authority shall ensure, insofar as
18 possible, that its appointees to the Task Force reflect the
19 composition of the Illinois population with regard to ethnic,
20 racial, age, and religious composition.

21 (d) The appointing authorities shall make their
22 appointments to the Task Force not later than 30 days after the
23 effective date of this amendatory Act of the 93rd General
24 Assembly. In the case of a vacancy on the Task Force, the
25 original appointing authority, using the criteria set forth in
26 this Section for the original appointment, shall fill the
27 vacancy.

28 (e) The Task Force shall meet at least quarterly or more
29 frequently at the call of the Chair.

30 (f) The Task Force Chair may establish committees for the
31 purpose of making special studies pursuant to its duties and
32 may appoint non-Task-Force members to serve on each committee
33 as resource persons. Resource persons shall be voting members
34 of the committees. Committees may meet with the frequency
35 needed to accomplish the purposes of this Section.

36 (g) Members of the Task Force are entitled to a per diem

1 and reimbursement for their necessary travel and subsistence
2 expenses incurred in performing their duties.

3 (h) A majority of the Task Force shall constitute a quorum
4 for the transaction of its business.

5 (i) The Task Force shall have the following duties:

6 (1) To obtain from the Department of Public Health, if
7 available, the Department's review of statistical and
8 qualitative data on the prevalence and burden of cervical
9 cancer. If such a review is not available from the
10 Department, the Task Force shall undertake such a review.

11 (2) To raise public awareness on the causes and nature
12 of cervical cancer, personal risk factors, the value of
13 prevention, early detection, options for testing,
14 treatment costs, new technology, medical care
15 reimbursement, and physician education.

16 (3) To identify priority strategies, new technologies,
17 or newly introduced vaccines that are effective in
18 preventing and controlling the risk of cervical cancer.

19 (4) To identify and examine the limitations of existing
20 laws, regulations, programs, and services with regard to
21 coverage and awareness issues for cervical cancer,
22 including requiring insurance or other coverage for PAP
23 smears and mammograms in accordance with the most recently
24 published American Cancer Society guidelines.

25 (5) To develop a statewide comprehensive Cervical
26 Cancer Prevention Plan and strategies for implementing the
27 Plan and for promoting the Plan to the general public,
28 State and local elected officials, and various public and
29 private organizations, associations, businesses,
30 industries, and agencies.

31 (6) To identify strategies to facilitate specific
32 commitments to help implement the Cervical Cancer
33 Prevention Plan from the entities listed in paragraph (8).

34 (7) To facilitate coordination of and communication
35 between State and local agencies and organizations
36 regarding current or future involvement in achieving the

1 aims of the Cervical Cancer Prevention Plan.

2 (8) To receive and to consider reports and testimony
3 from individuals, local health departments,
4 community-based organizations, voluntary health
5 organizations, and other public and private organizations
6 statewide to learn more about their contributions to
7 cervical cancer diagnosis, prevention, and treatment and
8 more about their ideas for improving cervical cancer
9 prevention, diagnosis, and treatment in Illinois.

10 (j) On or before April 1, 2005, and on or before April 1
11 each year thereafter, the Task Force shall submit a report to
12 the Governor and the General Assembly. Each annual report shall
13 address the following:

14 (1) The progress being made in fulfilling the duties of
15 the Task Force and in developing the Cervical Cancer
16 Prevention Plan.

17 (2) The anticipated time frame for completion of the
18 Cervical Cancer Prevention Plan.

19 (3) Recommended strategies or actions to reduce the
20 occurrence of and burdens suffered from cervical cancer by
21 citizens of this State.

22 (k) The Task Force shall expire on April 1, 2009, or upon
23 submission of the Task Force's final report to the Governor and
24 the General Assembly, whichever occurs earlier.

25 (l) The Department of Public Health shall use moneys
26 appropriated to it to implement this Section.