1 AN ACT concerning civil law.

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

- 4 Section 5. The Adoption Act is amended by changing Sections
- 5 18.04, 18.05, 18.06, 18.07, 18.1, 18.1a, 18.1b, 18.2, 18.3,
- 6 18.3a, 18.5, and 18.6 as follows:
- 7 (750 ILCS 50/18.04)
- 8 Sec. 18.04. Original Birth Certificate Access The Illinois
- 9 Adoption Registry and Medical Information Exchange;
- 10 legislative intent. The General Assembly recognizes that it is
- 11 the basic right of all persons to access their birth records,
- and, to this end, supports public policy that allows an adult
- adoptee to access his or her original birth certificate. The
- 14 General Assembly further recognizes that there are
- 15 <u>circumstances under which a birth parent may have compelling</u>
- 16 reasons for wishing to remain anonymous to a child he or she
- 17 <u>surrendered for adoption. In an effort to balance these</u>
- interests, the General Assembly supports public policy that
- 19 releases a non-certified copy of the original birth certificate
- 20 to an adult adopted person upon request unless a specific
- 21 request for anonymity has been filed with the Registry by a
- 22 birth parent named on the original birth certificate the
- 23 importance of creating a procedure by which mutually consenting

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adult members of birth and adoptive families, and adult adopted or surrendered persons may voluntarily exchange vital medical information throughout the life of the adopted or surrendered person. The General Assembly supports public policy that requires explicit mutual consent prior to the release of confidential information. The General Assembly further recognizes that it is in the best interest of adopted and surrendered persons that birth family medical histories and the preferences regarding contact of all parties to an adoption be compiled, preserved and provided to mutually consenting members of birth and adoptive families.

13 (750 ILCS 50/18.05)

(Source: P.A. 94-173, eff. 1-1-06.)

Sec. 18.05. The Illinois Adoption Registry and Medical 14 15 Information Exchange.

General function. Subject to appropriation, Department of Public Health shall administer the Illinois Adoption Registry and Medical Information Exchange in the manner outlined in subsections (b) and (c) for the purpose of facilitating the voluntary exchange of identifying and medical information between mutually consenting members of birth and adoptive families. The Department shall establish rules for the confidential operation of the Illinois Adoption Registry. The Department shall appoint an OBC-Access Public Information Campaign Oversight Committee comprised of, but not limited to,

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representatives of the Department of Public Health and the Department of Children and Family Services, as well as representatives of the organizations that serve, as of the effective date of this amendatory Act of the 96th General Assembly, on the Illinois Adoption Registry Advisory Council or the Confidential Intermediary Advisory Council. On and after the effective date of this amendatory Act of the 96th General Assembly, the OBC-Access Public Information Campaign Oversight Committee shall develop and ensure the timely implementation of a year-long, nationwide campaign to be conducted from November 1, 2010, through October 31, 2011, for the express purpose of informing the public in earnest about the conditions under which an adult adopted or surrendered person may receive a non-certified copy of his or her original birth certificate, and the procedures pursuant to which a birth parent may file a Birth Parent Preference Form to express his or her wishes with respect to contact with a surrendered son or daughter and the release of identifying information that appears on the original birth certificate. This year-long informational campaign shall include, but not be limited to:

- (1) Public service announcements to be distributed to local and national radio and television stations.
- (2) Notices to be distributed throughout Illinois to physicians' offices, religious institutions, social welfare organizations, retirement homes, and other entities capable of reaching individuals who may be impacted by this change in the

law.

- 2 (3) An informational website exclusively devoted to 3 providing the general public with information about the new law 4 as well as other forms of free electronic media.
 - (4) Press releases to be distributed to local and national radio and television stations, as well as to relevant websites.
 - (5) Announcements about the new law to be posted on the websites of all adoption agencies licensed in the State.
 - (6) Notices accompanying every vehicle registration renewal application issued by the Secretary of State's office between October 31, 2010, and November 1, 2011.
 - applications issued by the Secretary of State's office beginning 30 days after the effective date of this amendatory Act of the 96th General Assembly and through November 30, 2014. conduct a public information campaign through public service announcements and other forms of media coverage and, until December 31, 2010, through notices enclosed with driver's license renewal applications, shall inform the public of the Illinois Adoption Registry and Medical Information Exchange.

The Illinois Adoption Registry shall also maintain an informational Internet site where interested parties may access information about the Illinois Adoption Registry and Medical Information Exchange and download all necessary application forms. The Illinois Adoption Registry shall maintain statistical records regarding Registry participation

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- and publish and circulate to the public informational material about the function and operation of the Registry.
- 3 (b) Establishment of the Adoption/Surrender Records File. When a person has voluntarily registered with the Illinois 5 Adoption Registry and completed an Illinois Adoption Registry 6 Application or a Registration Identification Form, 7 Registry shall establish a new Adoption/Surrender Records 8 File. Such file may concern an adoption that was finalized by a 9 court action in the State of Illinois, an adoption of a person 10 born in Illinois finalized by a court action in a state other 11 than Illinois or in a foreign country, a surrender taken in the 12 State of Illinois, or an adoption filed according to Section 16.1 of the Vital Records Act under a Record of Foreign Birth 13 14 that was not finalized by a court action in the State of 15 Illinois. Such file may be established for adoptions or 16 surrenders finalized prior to as well as after the effective 17 date of this amendatory Act. A file may be created in any manner to preserve documents including but not limited to 18 19 microfilm, optical imaging, or electronic documents.
 - (c) Contents of the Adoption/Surrender Records File. An established Adoption/Surrender Records File shall be limited to the following items, to the extent that they are available:
 - (1) The General Information Section and Medical Information Exchange Questionnaire of any Illinois Adoption Registry Application or a Registration Identification Form which has been voluntarily completed

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by any registered party.

- Any photographs voluntarily provided by any registrant for any other registered party at the time of registration or any time thereafter. All such photographs shall be submitted in an unsealed envelope no larger than 8 1/2" x 11", and shall not include identifying information pertaining to any person other than the registrant who submitted them. Any such identifying information shall be redacted by the Department or the information shall be returned for removal of identifying information.
- (3) Any Information Exchange Authorization, or Denial of Information Exchange, or Birth Parent Preference Form which has been filed by a registrant.
- (4) For all adoptions finalized after January 1, 2000, copies of the original certificate of live birth and the certificate of adoption.
- (5) Any updated address submitted by any registered party about himself or herself.
- (6) Any proof of death that which has been submitted by a registrant.
- (7) Any birth certificate that has been submitted by a registrant.
- (8) Any marriage certificate that has been submitted by a registrant.
- (9) Any proof of guardianship that has been submitted by a registrant.

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(10)	Any	Request	for	a 1	Jon−Ce	ertifi	ed C	юру	of	an
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Registry.										

- (d) An established Adoption/Surrender Records File for an adoption filed in Illinois under a Record of Foreign Birth that was not finalized in a court action in the State of Illinois shall be limited to the following items submitted to the State Registrar of Vital Records under Section 16.1 of the Vital Records Act, to the extent that they are available:
 - Evidence as to the child's birth date (1)birthplace (including the country of birth and, available, the city and province of birth) provided by the original birth certificate, or by a certified copy, extract, or translation thereof or by other document essentially equivalent thereto (the records of the U.S. Citizenship and Immigration Services Immigration and Naturalization Service or of the U.S. Department of State to be considered essentially equivalent thereto).
 - (2) A certified copy, extract, or translation of the adoption decree or other document essentially equivalent (the records of the U.S. Citizenship and Immigration Services Immigration and Naturalization Service or of the U.S. Department of State to be considered

- 1 essentially equivalent thereto).
- 2 (3) A copy of the IR-3 visa.
- 3 (4) The name and address of the adoption agency that
- 4 handled the adoption.
- 5 (Source: P.A. 94-173, eff. 1-1-06; 94-430, eff. 8-2-05; 95-331,
- 6 eff. 8-21-07.)
- 7 (750 ILCS 50/18.06)
- 8 Sec. 18.06. Definitions. When used in Sections 18.05
- 9 through Section 18.6, for the purposes of the Registry:
- "Adopted person" means a person who was adopted pursuant to
- 11 the laws in effect at the time of the adoption.
- "Adoptive parent" means a person who has become a parent
- through the legal process of adoption.
- "Adult child" means the biological child 21 years of age or
- over of a deceased adopted or surrendered person.
- "Adult Adopted or Surrendered Person" means an adopted or
- 17 surrendered person 21 years of age or over.
- 18 "Agency" means a public child welfare agency or a licensed
- 19 child welfare agency.
- "Birth aunt" means the adult full or half sister of a
- 21 deceased birth parent.
- "Birth father" means the biological father of an adopted or
- 23 surrendered person who is named on the original certificate of
- live birth or on a consent or surrender document, or a
- 25 biological father whose paternity has been established by a

- 1 judgment or order of the court, pursuant to the Illinois
- 2 Parentage Act of 1984.
- 3 "Birth mother" means the biological mother of an adopted or
- 4 surrendered person.
- 5 "Birth parent" means a birth mother or birth father of an
- 6 adopted or surrendered person.
- 7 "Birth Parent Preference Form" means the form prepared by
- 8 the Department of Public Health pursuant to Section 18.2
- 9 <u>completed</u> by a birth parent registrant and filed with the
- 10 Registry that indicates the birth parent's preferences
- 11 regarding contact and the release of his or her identifying
- information on the non-certified copy of the original birth
- certificate released to an adult adopted or surrendered person
- or to the surviving adult child or surviving spouse of a
- deceased adopted or surrendered person who has filed a Request
- 16 for a Non-Certified Copy of an Original Birth Certificate.
- "Birth relative" means a birth mother, birth father, birth
- 18 sibling, birth aunt, or birth uncle.
- 19 "Birth sibling" means the adult full or half sibling of an
- adopted or surrendered person.
- "Birth uncle" means the adult full or half brother of a
- deceased birth parent.
- "Confidential intermediary" means an individual certified
- 24 by the Department of Children and Family Services pursuant to
- 25 Section 18.3a(e).
- 26 "Denial of Information Exchange" means an affidavit

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completed by a registrant with the Illinois Adoption Registry 1 2 and Medical Information Exchange denying the release of identifying information which has been filed with the Registry. 3

"Information Exchange Authorization" means an affidavit completed by a registrant with the Illinois Adoption Registry and Medical Information Exchange authorizing the release of identifying information which has been filed with the Registry.

"Medical Information Exchange Questionnaire" means the medical history questionnaire completed by a registrant of the Illinois Adoption Registry and Medical Information Exchange.

"Non-certified Copy of the Original Birth Certificate" means a non-certified copy of the original certificate of live birth of an adult adopted or surrendered person who was born in Illinois.

"Proof of death" means a death certificate.

"Registrant" or "Registered Party" means a birth parent, birth sibling, birth aunt, birth uncle, adopted or surrendered person 21 years of age or over, adoptive parent or legal quardian of an adopted or surrendered person under the age of 21, or adoptive parent, surviving spouse, or adult child of a deceased adopted or surrendered person who has filed an Illinois Adoption Registry Application or Registration Identification Form with the Registry.

"Registry" means the Illinois Adoption Registry and Medical Information Exchange.

"Request for a Non-Certified Copy of an Original Birth

- 1 Certificate" means an affidavit completed by an adult adopted
- 2 or surrendered person or by the surviving adult child or
- 3 surviving spouse of a deceased adopted or surrendered person
- and filed with the Registry requesting a non-certified copy of 4
- 5 an adult adopted or surrendered person's original certificate
- 6 of live birth in Illinois.
- "Surrendered person" means a person whose parents' rights 7
- have been surrendered or terminated but who has not been 8
- 9 adopted.
- 10 "Surviving spouse" means the wife or husband of a deceased
- 11 adopted or surrendered person who has one or more biological
- 12 children under the age of 21.
- 13 "18.3 Statement" means a statement regarding the
- 14 disclosure of identifying information signed by a birth parent
- under Section 18.3 of this Act as it existed immediately prior 15
- 16 to the effective date of this amendatory Act of the 96th
- 17 General Assembly.
- (Source: P.A. 94-173, eff. 1-1-06.) 18
- 19 (750 ILCS 50/18.07)
- 20 Sec. 18.07. Adoption Registry Advisory Council. There is
- 21 established an Adoption Registry Advisory Council. The Council
- 22 shall meet twice yearly, and at least once yearly jointly with
- the Confidential Intermediary Advisory Council. The Council 23
- 24 shall be chaired by the Director of the Department of Public
- 25 Health or his designee. The Council shall include the Director

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of the Department of Children and Family Services or his 1 2 designee. The Council shall also include one representative 3 from each of the following organizations: Adoption Advocates of Illinois, Adoptive Families Today, American Adoption Congress, Catholic Conference of Illinois, Chicago Area Families for 5 Adoption, Chicago Bar Association, Child Care Association of 6 Illinois, Children Remembered, Inc., Children's Home and Aid 7 Society of Illinois, Child Welfare Advisory Council, The 8 9 Cradle, Healing Hearts, Illinois Foster Parents Association, 10 Illinois State Bar Association, Illinois State 11 Society, Jewish Children's Bureau, Kids Help Foundation, LDS 12 Social Services, Lutheran Social Services of Illinois, Midwest Adoption 13 Marvville Academy, Center, St. Mary's 14 Services, Stars of David, and Truthseekers in Adoption.

If any one of the above named organizations notifies the Director of the Department of Public Health in writing that the organization does not wish to participate on the Advisory Council or that the organization is no longer functioning, the Director shall appoint another organization that represents the same constituency as the named organization to replace the named organization on the Council.

- 22 The Council's responsibilities shall include the following:
 - 1) Advising the Department on the development of rules, procedures, and forms utilized by the Illinois Adoption Registry and Medical Information Exchange;
 - 2) Making recommendations regarding the procedures,

tools and technology that will ensure efficient and effective operation of the Registry;

- 3) Submitting a report to the Governor and the General Assembly no later than January 1, 2001, on the status of the Registry, an evaluation of the effectiveness of the Registry, and pertinent statistics regarding the Registry;
- 3) 4) Assisting the Department with the development, publication, and circulation of an informational pamphlet that describes the purpose, function, and mechanics of the Illinois Adoption Registry and Medical Information Exchange, including information about who is eligible to register and how to register; information about the questions and concerns that registrants may develop when they register or when they receive information from the Registry; and a list of services, programs, groups, and informational websites that are available to assist registrants with their questions and concerns; -
- 4) Collecting, compiling, and reviewing statistical data and empirical information concerning the procedures in the Registry including, but not limited to, data concerning the filing of Denials of Information Exchange,

 Information Exchange Authorizations, Requests for a Non-Certified Copy of an Original Birth Certificate, and Birth Parent Preference Forms.

(Source: P.A. 91-417, eff. 1-1-00.)

- 1 (750 ILCS 50/18.1) (from Ch. 40, par. 1522.1)
- 2 Sec. 18.1. Disclosure of identifying information.
- (a) The Department of Public Health shall establish and maintain a Registry for the purpose of <u>allowing providing</u>

 identifying information to mutually consenting members of birth and adoptive families to exchange identifying and medical information. Identifying information for the purpose of this Act shall mean any one or more of the following:
- 9 (1) The name and last known address of the consenting person or persons.
 - (2) A copy of the Illinois Adoption Registry
 Application of the consenting person or persons.
 - (3) A <u>non-certified</u> copy of the original <u>birth</u> certificate of live birth of <u>an adult</u> the adopted or surrendered person.
 - (b) Written authorization from all parties identified must be received prior to disclosure of any identifying information.

 with the exception of non-certified copies of original birth certificates released to adult adopted or surrendered persons or to surviving adult children and surviving spouses of deceased adopted or surrendered persons pursuant to the procedures outlined in Section 18.1b(e).
 - (c) (b) At any time after a child is surrendered for adoption, or at any time during the adoption proceedings or at any time thereafter, either birth parent or both of them may file with the Registry a Birth Parent Registration

Identification Form and an Information Exchange Authorization

or a Denial of Information Exchange.

(d) (b-5) A birth sibling 21 years of age or over who was not surrendered for adoption and who has submitted a copy of his or her birth certificate as well as proof of death for a deceased birth parent and such birth parent did not file a Denial of Information Exchange with the Registry prior to his or her death may file a Registration Identification Form and an Information Exchange Authorization or a Denial of Information Exchange.

(e) (b-7) A birth aunt or birth uncle who has submitted birth certificates for himself or herself and for a deceased birth parent naming at least one common biological parent as well as proof of death for the deceased birth parent and such birth parent did not file a Denial of Information Exchange with the Registry prior to his or her death may file a Registration Identification Form and an Information Exchange Authorization or a Denial of Information Exchange.

(f) (e) Any adopted person 21 years of age or over, any surrendered person 21 years of age or over, or any adoptive parent or legal guardian of an adopted or surrendered person under the age of 21 may file with the Registry a Registration Identification Form and an Information Exchange Authorization or a Denial of Information Exchange.

 $\underline{\text{(g)}}$ (c-3) Any adult child 21 years of age or over of a deceased adopted or surrendered person who has submitted a copy

of his or her birth certificate naming an adopted or surrendered person as his or her biological parent as well as proof of death for the deceased adopted or surrendered person and such adopted or surrendered person did not file a Denial of Information Exchange with the Registry prior to his or her death may file a Registration Identification Form and an Information Exchange Authorization or a Denial of Information Exchange.

(h) (c-5) Any surviving spouse of a deceased adopted or surrendered person 21 years of age or over who has submitted proof of death for the deceased adopted or surrendered person and such adopted or surrendered person did not file a Denial of Information Exchange with the Registry prior to his or her death as well as a birth certificate naming themselves and the adopted or surrendered person as the parents of a minor child under the age of 21 may file a Registration Identification Form and an Information Exchange Authorization or a Denial of Information Exchange.

(i) (c 7) Any adoptive parent or legal guardian of a deceased adopted or surrendered person 21 years of age or over who has submitted proof of death as well as proof of parentage or guardianship for the deceased adopted or surrendered person and such adopted or surrendered person did not file a Denial of Information Exchange with the Registry prior to his or her death may file a Registration Identification Form and an Information Exchange Authorization or a Denial of Information

Exchange.

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(j) (d) The Department of Public Health shall supply to the adopted or surrendered person or his or her adoptive parents, legal quardians, adult children or surviving spouse, and to the birth parents identifying information only if both the adopted or surrendered person, or one of his or her adoptive parents, legal guardians, adult children or his or her surviving spouse, and the birth parents have filed with the Registry an Information Exchange Authorization and the information at the Registry indicates that the consenting adopted or surrendered person, the child of the consenting adoptive parents or legal guardians, the parent of the consenting adult child of the adopted or surrendered person, or the deceased wife or husband of the consenting surviving spouse is the child of the consenting birth parents, except identifying information that appears on a non-certified copy of an original birth certificate may be provided to an adult adopted or surrendered person or to the surviving adult child or surviving spouse of a deceased adopted or surrendered person pursuant to the procedures outlined in Section 18.1b(e) of this Act.

The Department of Public Health shall supply to adopted or surrendered persons who are birth siblings identifying information only if both siblings have filed with the Registry an Information Exchange Authorization and the information at the Registry indicates that the consenting siblings have one or both birth parents in common. Identifying information shall be

2 surrendered if any such sibling is 21 years of age or over.

Identifying information shall be supplied to consenting birth

siblings who were not adopted or surrendered if any such

sibling is 21 years of age or over and has proof of death of the

6 common birth parent and such birth parent did not file a Denial

of Information Exchange with the Registry prior to his or her

8 death.

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- (k) (d 3) The Department of Public Health shall supply to the adopted or surrendered person or his or her adoptive parents, legal quardians, adult children or surviving spouse, and to a birth aunt identifying information only if both the adopted or surrendered person or one of his or her adoptive parents, legal quardians, adult children or his or surviving spouse, and the birth aunt have filed with the Registry an Information Exchange Authorization the information at the Registry indicates that the consenting adopted or surrendered person, or the child of the consenting adoptive parents or legal quardians, or the parent of the consenting adult child, or the deceased wife or husband of the consenting surviving spouse of the adopted or surrendered person is or was the child of the brother or sister of the consenting birth aunt.
- (1) (d-5) The Department of Public Health shall supply to the adopted or surrendered person or his or her adoptive parents, legal guardians, adult children or surviving spouse,

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and to a birth uncle identifying information only if both the adopted or surrendered person or one of his or her adoptive parents, legal guardians, adult children or his or her surviving spouse, and the birth uncle have filed with the Registry an Information Exchange Authorization information at the Registry indicates that the consenting adopted or surrendered person, or the child of the consenting adoptive parents or legal quardians, or the parent of the consenting adult child, or the deceased wife or husband of the consenting surviving spouse of the adopted or surrendered person is or was the child of the brother or sister of the consenting birth uncle.

(m) (e) A registrant may notify the Registry of his or her desire not to have identifying information his or her identity revealed or may revoke any previously filed Information Exchange Authorization by completing and filing with the Registry a Registry Identification Form along with a Denial of Exchange. The Illinois Adoption Registry Information Application does not need to be completed in order to file a Denial of Information Exchange. Any registrant, except a birth parent, may revoke his or her Denial of Information Exchange by filing an Information Exchange Authorization. A birth parent may revoke a Denial of Information Exchange by filing a Birth Parent Preference Form. Any birth parent who has previously filed a Birth Parent Preference Form where Option E was selected may revoke such preference by filing a subsequent

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2 <u>D.</u> The Department of Public Health shall act in accordance with

the most recently filed affidavit Authorization.

(n) (f) Identifying information ascertained from the Registry shall be confidential and may be disclosed only (1) upon a Court Order, which order shall name the person or persons entitled to the information, or (2) to a registrant who is the subject of an Information Exchange Authorization that was completed by another registrant and filed with the Illinois Adoption Registry and Medical Information Exchange, or (3) as authorized under subsection (h) of Section 18.3 of this Act, or (4) pursuant to the procedures outlined in Section 18.1b(e) of this Act. A copy of the certificate of live birth shall only be released to an adopted or surrendered person who was born in Illinois and who is the subject of an Information Exchange Authorization filed by one of his or her birth relatives. Any person who willfully provides unauthorized disclosure of any information filed with the Registry or who knowingly or intentionally files false information with the Registry shall be guilty of a Class A misdemeanor and shall be liable for damages.

(o) (g) If information is disclosed pursuant to this Act, the Department shall redact it to remove any identifying information about any party who has not consented to the disclosure of such identifying information, or, in the case of identifying information on the original birth certificate,

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2 (Source: P.A. 94-173, eff. 1-1-06.)

3 (750 ILCS 50/18.1a)

4 Sec. 18.1a. Registry matches.

- (a) The Registry shall release identifying information, as specified on the <u>applicant's</u> Information Exchange Authorization, to the following mutually consenting registered parties and provide them with any photographs <u>or correspondence</u> which have been placed in the Adoption/Surrender Records File and are specifically intended for the registered parties:
 - (i) an adult adopted or surrendered person and one of his or her birth relatives who have both filed an applicable Information Exchange Authorization specifying the other consenting party with the Registry, if information available to the Registry confirms that the consenting adopted or surrendered person is biologically related to the consenting birth relative;
 - (ii) the adoptive parent or legal guardian of an adopted or surrendered person under the age of 21 and one of the adopted or surrendered person's birth relatives who have both filed an Information Exchange Authorization specifying the other consenting party with the Registry, if information available to the Registry confirms that the child of the consenting adoptive parent or legal guardian is biologically related to the consenting birth relative;

and

- (iii) the adoptive parent, adult child or surviving spouse of a deceased adopted or surrendered person, and one of the adopted or surrendered person's birth relatives who have both filed an applicable Information Exchange Authorization specifying the other consenting party with the Registry, if information available to the Registry confirms that child of the consenting adoptive parent, the parent of the consenting adult child or the deceased wife or husband of the consenting surviving spouse of the adopted or surrendered person was biologically related to the consenting birth relative.
- (b) If a registrant is the subject of a Denial of Information Exchange filed by another registered party, the Registry shall not release identifying information to either registrant with the exception of non-certified copies of the original birth certificate released under Section 18.1b(e), and as to a birth parent who has prohibited release of identifying information on the original birth certificate to the adult adopted or surrendered person, upon the death of said birth parent.
- (c) If a registrant has completed a Medical Information Exchange Questionnaire and has consented to its disclosure, that Questionnaire shall be released to any registered party who has indicated their desire to receive such information on his or her Illinois Adoption Registry Application, if

- 1 information available to the Registry confirms that the
- 2 consenting parties are biologically related, that the
- 3 consenting birth relative and the child of the consenting
- 4 adoptive parents or legal guardians are birth relatives, or
- 5 that the consenting birth relative and the deceased wife or
- 6 husband of the consenting surviving spouse are birth relatives.
- 7 (Source: P.A. 94-173, eff. 1-1-06.)
- 8 (750 ILCS 50/18.1b)
- 9 Sec. 18.1b. The Illinois Adoption Registry Application.
- 10 The Illinois Adoption Registry Application shall substantially
- include the following:
- 12 (a) General Information. The Illinois Adoption Registry
- 13 Application shall include the space to provide Information
- about the registrant including his or her surname, given name
- or names, social security number (optional), mailing address,
- home telephone number, gender, date and place of birth, and the
- 17 date of registration. If applicable and known to the
- 18 registrant, he or she may include the maiden surname of the
- 19 birth mother, any subsequent surnames of the birth mother, the
- 20 surname of the birth father, the given name or names of the
- 21 birth parents, the dates and places of birth of the birth
- 22 parents, the surname and given name or names of the adopted
- 23 person prior to adoption, the gender and date and place of
- 24 birth of the adopted or surrendered person, the name of the
- adopted person following his or her adoption and the state and

- 1 county where the judgment of adoption was finalized.
 - (b) Medical Information Exchange Questionnaire. In recognition of the importance of medical information and of recent discoveries regarding the genetic origin of many medical conditions and diseases all registrants shall be asked to voluntarily complete a Medical Information Exchange Questionnaire.
 - (1) For birth relatives, the Medical Information Exchange Questionnaire shall include a comprehensive check-list of medical conditions and diseases including those of genetic origin. Birth relatives shall be asked to indicate all genetically-inherited diseases and conditions on this list which are known to exist in the adopted or surrendered person's birth family at the time of registration. In addition, all birth relatives shall be apprised of the Registry's provisions for voluntarily submitting information about their and their family's medical histories on a confidential, ongoing basis.
 - (2) Adopted and surrendered persons and their adoptive parents, legal guardians, adult children, and surviving spouses shall be asked to indicate all genetically-inherited diseases and medical conditions with which the adopted or surrendered person or, if applicable, his or her children have been diagnosed since birth.
 - (3) The Medical Information Exchange Questionnaire shall include a space where the registrant may authorize

the release of the Medical Information Exchange Questionnaire to specified registered parties and a disclaimer informing registrants that the Department of Public Health cannot guarantee the accuracy of medical information exchanged through the Registry.

- (c) Written statement. All registrants shall be given the opportunity to voluntarily file a written statement with the Registry. This statement shall be submitted in the space provided. No written statement submitted to the Registry shall include identifying information pertaining to any person other than the registrant who submitted it. Any such identifying information shall be redacted by the Department or returned for removal of identifying information.
- (d) Exchange of Contact information. All registrants may indicate their wishes regarding contact and the exchange of identifying and/or medical information with any other registrant by completing an Information Exchange Authorization or a Denial of Information Exchange.
 - (1) Information Exchange Authorization. Adopted or surrendered persons 21 years of age or over who are interested in exchanging identifying and/or medical information or would welcome contact with one or more of their birth relatives; birth parents who are interested in exchanging identifying and/or medical information or would welcome contact with an adopted or surrendered person 21 years of age or over, or one or more of his or her adoptive

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parents, legal quardians, adult children, or a surviving spouse; birth siblings 21 years of age or over who were adopted or surrendered and who are interested in exchanging identifying and/or medical information or would welcome contact with an adopted or surrendered person, or one or more of his or her adoptive parents, legal quardians, adult children, or a surviving spouse; birth siblings 21 years of age or over who were not surrendered and who have submitted proof of death for any common birth parent who did not file a Denial of Information Exchange prior to his or her death, and who are interested in exchanging identifying and/or medical information or would welcome contact with an adopted or surrendered person, or one or more of his or her adoptive parents, legal guardians, adult children, or a surviving spouse; birth aunts and birth uncles 21 years of age or over who have submitted birth certificates for themselves and a deceased birth parent naming at least one common biological parent as well as proof of death for a deceased birth parent who did not file a Denial of Information Exchange prior to his or her death and who are interested in exchanging identifying and/or medical information or would welcome contact with an adopted or surrendered person 21 years of age or over, or one or more of his or her adoptive parents, legal guardians, adult children or a surviving spouse; adoptive parents or legal quardians of adopted or surrendered persons under the age

legal

welcome contact with one or more of the adopted or

surrendered person's birth relatives may specify with whom

they wish to exchange identifying information by filing an

quardians

1 of 21 who are interested in exchanging identifying and/or 2 medical information or would welcome contact with one or 3 of the adopted or surrendered person's more adoptive parents and 4 relatives; 5 deceased adopted or surrendered persons 21 years of age or over who have submitted proof of death for a deceased 6 7 adopted or surrendered person who did not file a Denial of 8 Information Exchange prior to his or her death and who are 9 interested in exchanging identifying and/or medical 10 information or would welcome contact with one or more of 11 the adopted or surrendered person's birth relatives; adult 12 children of deceased adopted or surrendered persons who have submitted a birth certificate naming the adopted or 13 14 surrendered person as their biological parent and proof of 15 death for an adopted or surrendered person who did not file 16 a Denial of Information Exchange prior to his or her death; 17 and surviving spouses of deceased adopted or surrendered 18 persons who have submitted a marriage certificate naming an 19 adopted or surrendered person as their deceased wife or 20 husband and proof of death for an adopted or surrendered person who did not file a Denial of Information Exchange 21 22 prior to his or her death and who are interested in 23 exchanging identifying and/or medical information or would

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Information Exchange Authorization.

Information Exchange. Adopted (2) Denial of surrendered persons 21 years of age or over who do not wish to exchange identifying information or establish contact with one or more of their birth relatives may specify with whom they do not wish to exchange identifying information or do not wish to establish contact by filing a Denial of Information Exchange. Birth relatives who do not wish to establish contact with an adopted or surrendered person or one or more of his or her adoptive parents, legal quardians, or adult children may specify with whom they do not wish to exchange identifying information or do not wish to establish contact by filing a Denial of Information Exchange. Birth parents who wish to prohibit the release of their identifying information on the original birth certificate released to an adult adopted or surrendered person who was born after January 1, 1946, or to the surviving adult child or surviving spouse of a deceased adopted or surrendered person who was born after January 1, 1946, may do so by filing a Denial with the Registry on or before December 31, 2010. As of January 1, 2011, birth parents who wish to prohibit the release of identifying information on the non-certified copy of the original birth certificate released to an adult adopted surrendered person or to the surviving adult child or surviving spouse of a deceased adopted or surrendered person may do so by

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selecting Option E on a Birth Parent Preference Form and filing the Form with the Registry. Adoptive parents or legal guardians of adopted or surrendered persons under the age of 21 who do not wish to establish contact with one or more of the adopted or surrendered person's birth relatives specify with whom they do not wish to exchange identifying information by filing a Denial of Information Exchange. Adoptive parents, adult children, and surviving spouses of deceased adoptees who do not wish to exchange identifying information or establish contact with one or more of the adopted or surrendered person's birth relatives may specify with whom they do not wish to exchange identifying information or do not wish to establish contact by filing a Denial of Information Exchange. The Illinois Adoption Registry Application does not need to be completed in order to file a Denial of Information Exchange.

(3) Birth Parent Preference Form. Beginning January 1, 2011, birth parents who are eligible to register with the Illinois Adoption Registry and Medical Information Exchange and who wish to communicate their wishes regarding contact and/or the release of their identifying information on the non-certified copy of the original birth certificate released to an adult adopted or surrendered person or the surviving adult child or surviving spouse of a deceased adopted or surrendered person who has requested a copy of the adopted or surrendered person's original

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birth certificate by filing a Request for a Non-Certified Copy of an Original Birth Certificate pursuant to subsection (e) of this Section, may file a Birth Parent Preference Form with the Registry. All Birth Parent Preference Forms on file with the Registry at the time of receipt of a Request for a Non-Certified Copy of an Original Birth Certificate from an adult adopted or surrendered person or the surviving adult child or surviving spouse of a deceased adopted or surrendered person shall be forwarded to the relevant adopted or surrendered person or surviving adult child or surviving spouse of a deceased adopted or surrendered person along with a non-certified copy of the adopted or surrendered person's original birth certificate as outlined in subsection (e) of this Section.

(e) Procedures for requesting a non-certified copy of an original birth certificate by an adult adopted or surrendered person or by a surviving adult child or surviving spouse of a deceased adopted or surrendered person:

(1) On or after the effective date of this amendatory Act of the 96th General Assembly, any adult adopted or surrendered person who was born in Illinois prior to January 1, 1946, may complete and file with the Registry a Request for a Non-Certified Copy of an Original Birth Certificate. The Registry shall provide such adult adopted or surrendered person with an unaltered, non-certified

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copy of his or her original birth certificate upon receipt of the Request for a Non-Certified Copy of an Original Birth Certificate. Additionally, in cases where an adopted or surrendered person born in Illinois prior to January 1, 1946, is deceased, and one of his or her surviving adult children or his or her surviving spouse has registered with the Registry, he or she may complete and file with the Registry a Request for a Non-Certified Copy of an Original Birth Certificate. The Registry shall provide such surviving adult child or surviving spouse with an unaltered, non-certified copy of the adopted or surrendered person's original birth certificate upon receipt of the Request for a Non-Certified Copy of an Original Birth Certificate.

(2) Beginning November 15, 2011, any adult adopted or <u>surrendered person who was born in</u> Illinois on or after January 1, 1946, may complete and file with the Registry a Request for a Non-certified Copy of an Original Birth Certificate. Additionally, in cases where the adopted or surrendered person is deceased and one of his or her surviving adult children or his or her surviving spouse has registered with the Registry, he or she may complete and file with the Registry a Request for a Non-Certified Copy of an Original Birth Certificate. Upon receipt of such request from an adult adopted or surrendered person or from one of his or her surviving adult children or his or her

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surviving spouse, the Registry shall:

(i) Determine if there is a Denial of Information Exchange which was filed by a birth parent named on the original birth certificate prior to January 1, 2011. If a Denial was filed by a birth parent named on the original birth certificate prior to January 1, 2011, and there is no proof of death in the Registry file for the birth parent who filed said Denial, the Registry shall <u>inform the requesting adult adopted or</u> surrendered person or the requesting surviving adult child or surviving spouse of a deceased adopted or surrendered person that they may receive a non-certified copy of the original birth certificate from which all identifying information pertaining to the birth parent who filed the Denial has been redacted. A requesting adult adopted or surrendered person shall also be informed in writing of his or her right to petition the court for the appointment of a confidential intermediary pursuant to Section 18.3a of this Act and, if applicable, to conduct a search through an agency post-adoption search program once 5 years have elapsed since the birth parent filed the Denial of Information Exchange with the Registry. (ii) Determine if a birth parent named on the original birth certificate has filed a Birth Parent

Preference Form. If one of the birth parents named on

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the original birth certificate filed a Birth Parent Preference Form and selected Option A, B, C, or D, the Registry shall forward to the adult adopted or surrendered person or to the surviving adult child or surviving spouse of a deceased adopted or surrendered person a copy of the Birth Parent Preference Form. If one of the birth parents named on the original birth certificate filed a Birth Parent Preference Form and selected Option E, and there is no proof of death in the Registry file for the birth parent who filed said Birth Parent Preference Form, the Registry shall inform the requesting adult adopted or surrendered person or the requesting surviving adult child or surviving spouse of a deceased adopted or surrendered person that he or she may receive a non-certified copy the original birth certificate from which identifying information pertaining to the birth parent who completed the Birth Parent Preference Form has been redacted per the birth parent's specifications on the Form. The Registry shall forward to the adult adopted or surrendered person or to the surviving adult child or surviving spouse of a deceased adopted or surrendered person a copy of the Birth Parent Preference Form filed by the birth parent from which identifying information has been redacted per the birth parent's specifications on the Form. The

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requesting adult adopted or surrendered person shall also be informed in writing of his or her right to petition the court for the appointment of a confidential intermediary pursuant to Section 18.3a of this Act, and, if applicable, to conduct a search through an agency post-adoption search program once 5 years have elapsed since the birth parent filed the Birth Parent Preference Form, on which Option E was selected, with the Registry.

(iii) Determine if a birth parent named on the original birth certificate has filed an Information Exchange Authorization.

(iv) If the Registry has confirmed that a requesting adult adopted or surrendered person or the parent of a requesting adult child of a deceased adopted or surrendered person or the husband or wife of a requesting surviving spouse was not the object of a Denial of Information Exchange filed by a birth parent on or before December 31, 2010, and that no birth parent named on the original birth certificate has filed a Birth Parent Preference Form where Option E was selected prior to the receipt of a Request for a Non-Certified Copy of an Original Birth Certificate, the Registry shall provide the adult adopted or surrendered person or his or her surviving adult child or surviving spouse with an unaltered non-certified

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copy of the adopted or surrendered person's original birth certificate.

- (3) In cases where the Registry receives a Birth Parent Preference Form from a birth parent subsequent to the release of the non-certified copy of the original birth certificate to an adult adopted or surrendered person or to the surviving adult child or surviving spouse of a deceased adopted or surrendered person, the Birth Parent Preference Form shall be immediately forwarded to the adult adopted or surrendered person or to the surviving adult child or surviving spouse of the deceased adopted or surrendered person and the birth parent who filed the form shall be informed that the relevant original birth certificate has already been released.
- (4) A copy of the original birth certificate shall only be released to adopted or surrendered persons who were born in Illinois; to surviving adult children or surviving spouses of deceased adopted or surrendered persons who were born in Illinois; or to 2 registered parties who have both consented to the release of a non-certified copy of the original birth certificate to one another through the Registry when the birth of the relevant adopted or surrendered person took place in Illinois.
- (5) In cases where the Registry receives a Request for a Non-Certified Copy of an Original Birth Certificate from an adult adopted or surrendered person who has not

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completed a Registry application and the file of that adopted or surrendered person includes an Information Exchange Authorization or Medical Information Exchange Questionnaire from one or more of his or her birth relatives, the Registry shall so inform the adult adopted or surrendered person and forward Registry application forms to him or her along with a non-certified copy of the original birth certificate consistent with the procedures outlined in this subsection (e).

- (6) In cases where a birth parent registered with the Registry and filed a Medical Information Exchange Questionnaire prior to the effective date of this amendatory Act of the 96th General Assembly but gave no indication as to his or her wishes regarding contact or the sharing of identifying information, the Registry shall contact the birth parent by written letter prior to January 1, 2011, and provide him or her with the opportunity to indicate his or her preference regarding contact and the sharing of identifying information by submitting a Birth Parent Preference Form to the Registry prior to November 1, 2011.
- (7) In cases where the Registry cannot locate a copy of the original birth certificate in the Registry file, they shall be authorized to request a copy of the original birth certificate from the Illinois county where the birth took place for placement in the Registry file.

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(8) Adopted and surrendered persons who wish to have their names placed with the Illinois Adoption Registry and Medical Information Exchange may do so by completing a Registry application at any time, but completing a Registry application shall not be required for adopted and surrendered persons who seek only to obtain a copy of their original birth certificate or any relevant Birth Parent Preference Forms through the Registry.

(9) In cases where a birth parent filed a Denial of Information Exchange with the Registry prior to January 1, 2011, or filed a Birth Parent Preference Form with the Registry and selected Option E after January 1, 2011, and a proof of death for the birth parent who filed the Denial or the Birth Parent Preference Form has been filed with the Registry by either a confidential intermediary or a surviving relative of the deceased birth parent, the Registry shall be authorized to release an unaltered non-certified copy of the original birth certificate to an adult adopted or surrendered person or to the surviving adult child or surviving spouse of a deceased adopted or surrendered person who has filed a Request for a Non-Certified Copy of the Original Birth Certificate with the Registry.

(10) On and after the effective date of this amendatory Act of the 96th General Assembly, in cases where all birth parents named on the original birth certificate of an

adopted or surrendered person born after January 1, 1946,
are deceased and copies of death certificates for all birth
parents named on the original birth certificate have beer
filed with the Registry by either a confidential
intermediary or a surviving relative of the deceased birth
parent, the Registry shall be authorized to release a
non-certified copy of the original birth certificate to the
adopted or surrendered person upon receipt of his or her
Request for a Non-Certified Copy of an Original Birth
Certificate.

- (f) (e) A registrant may complete all or any part of the Illinois Adoption Registry Application. All Illinois Adoption Registry Applications, Information Exchange Authorizations, Denials of Information Exchange, requests to revoke an Information Exchange Authorization or Denial of Information Exchange, and affidavits submitted to the Registry shall be accompanied by proof of identification.
- (f) The Department shall establish the Illinois Adoption Registry Application form including the Medical Information Exchange Questionnaire by rule.
- (Source: P.A. 94-173, eff. 1-1-06.)
- (750 ILCS 50/18.2) (from Ch. 40, par. 1522.2)
- Sec. 18.2. Forms.
- (a) The Department shall develop the Illinois Adoption Registry forms as provided in this Section. The General

1	Assembly shall reexamine the content of the form as requested
2	by the Department, in consultation with the Registry Advisory
3	Council. The form of the Birth Parent Registration
4	Identification Form shall be substantially as follows:
5	BIRTH PARENT REGISTRATION IDENTIFICATION
6	(Insert all known information)
7	I,, state that I am the (mother or father) of the
8	following child:
9	Child's original name: (first) (middle)
10	(last), (hour of birth), (date of birth),
11	(city and state of birth), (name of
12	hospital).
13	Father's full name: (first) (middle)
14	(last), (date of birth), (city and state of
15	birth).
16	Name of mother inserted on birth certificate: (first)
17	(middle) (last), (race), (date
18	of birth), (city and state of birth).
19	That I surrendered my child to: (name of agency),
20	(city and state of agency), (approximate date
21	child surrendered).
22	That I placed my child by private adoption: (date),
23	(city and state).
24	Name of adoptive parents, if known:
25	Other identifying information:
26	

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parent: .... (first) .... (middle) .... (last),
1
 2
             ..... (race).
 3
      I was adopted through: .... (name of agency).
      I was adopted privately: ..... (state "yes" if known).
 5
      I was adopted in ..... (city and state), ..... (approximate
 6
         date).
7
      Other identifying information: ......
8
                                            9
                                             (signature of adoptee)
10
      . . . . . . . . . . .
                                         11
      (date)
                                         (printed name of adoptee)
12
              The form of the Surrendered Person Registration
          (C)
      Identification shall be substantially as follows:
1.3
14
                     SURRENDERED PERSON REGISTRATION
15
                             IDENTIFICATION
16
                     (Insert all known information)
17
      I, ...., state the following:
18
         Surrendered Person's present name: .... (first) .....
              (middle) ..... (last).
19
         Surrendered Person's name at birth (if known): .....
20
21
              (first) .... (middle) .... (last), .... (birth
22
             date), ..... (city and state of birth), ..... (sex),
23
              ..... (race).
24
         Name of guardian father: ..... (first) ..... (middle) .....
25
              (last), ..... (race).
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1	Maiden name of guardian mother: (first)
2	(middle) (last), (race).
3	Name of birth mother (if known): (first)
4	(middle) (last) (race).
5	Name of birth father (if known): (first)
6	(middle) (last), (race).
7	Name(s) at birth of sibling(s) having a common birth parent
8	with surrendered person (if known): (first)
9	(middle) (last), (race), and name of
10	common birth parent: (first) (middle)
11	(last), (race).
12	I was surrendered for adoption to: (name of agency).
13	I was surrendered for adoption in (city and state),
14	(approximate date).
15	Other identifying information:
16	
17	(signature of surrendered person)
18	
19	(date) (printed name of person
20	surrendered for adoption)
21	(c-3) The form of the Registration Identification Form for
22	Surviving Relatives of Deceased Birth Parents shall be
23	substantially as follows:
24	REGISTRATION IDENTIFICATION FORM
25	FOR SURVIVING RELATIVES OF DECEASED BIRTH PARENTS

```
1
                       (Insert all known information)
      I, ...., state the following:
 2
 3
          Name of deceased birth parent at time of surrender:
          Deceased birth parent's date of birth:
 4
          Deceased birth parent's date of death:
 6
          Adopted or surrendered person's name at birth (if known):
7
              .... (first) .... (middle) .... (last), .... (birth
 8
              date), ..... (city and state of birth), ..... (sex),
 9
              .... (race).
10
      My relationship to the adopted or surrendered person (check
11
      one): (birth parent's non-surrendered child) (birth parent's
12
      sister) (birth parent's brother).
1.3
      If you are a non-surrendered child of the birth parent, provide
14
      name(s) at birth and age(s) of non-surrendered siblings having
15
      a common parent with the birth parent. If more than one
16
      sibling, please give information requested below on reverse
      side of this form. If you are a sibling or parent of the birth
17
18
      parent, provide name(s) at birth and age(s) of the sibling(s)
19
      of the birth parent. If more than one sibling, please give
20
      information requested below on reverse side of this form.
21
          Name (First) .... (middle) .... (last), .... (birth
22
              date), ..... (city and state of birth), ..... (sex),
```

Name(s) of common parent(s) (first) (middle)

(last), (race), (first) (middle)

.... (race).

23

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1	(last),(race).
2	My birth sibling/child of my brother/child of my sister/ was
3	surrendered for adoption to (name of agency) City and
4	state of agency Date(approximate) Other
5	identifying information (Please note that you must: (i)
6	be at least 21 years of age to register; (ii) submit with your
7	registration a certified copy of the birth parent's birth
8	certificate; (iii) submit a certified copy of the birth
9	parent's death certificate; and (iv) if you are a
10	non-surrendered birth sibling or a sibling of the deceased
11	birth parent, also submit a certified copy of your birth
12	certificate with this registration. No application from a
13	surviving relative of a deceased birth parent can be accepted
14	if the birth parent filed a Denial of Information Exchange
15	prior to his or her death.)
16	
17	(signature of birth parent's surviving relative)
18	
19	(date) (printed name of birth
20	parent's surviving relative)
21	(c-5) The form of the Registration Identification Form for
22	Surviving Relatives of Deceased Adopted or Surrendered Persons
23	shall be substantially as follows:

REGISTRATION IDENTIFICATION FORM FOR

```
SURVIVING RELATIVES OF DECEASED ADOPTED OR SURRENDERED PERSONS
1
 2
                      (Insert all known information)
 3
      I, ...., state the following:
          Adopted or surrendered person's name at birth (if known):
 4
 5
              (first) .... (middle) .... (last), .... (birth
              date), ..... (city and state of birth), ..... (sex),
 6
 7
              ..... (race).
 8
          Adopted or surrendered person's date of death:
 9
      My relationship to the deceased adopted or surrendered
10
      person(check one): (adoptive mother) (adoptive father) (adult
11
      child) (surviving spouse).
12
      If you are an adult child or surviving spouse of the adopted or
      surrendered person, provide name(s) at birth and age(s) of the
13
14
      children of the adopted or surrendered person. If the adopted
15
      or surrendered person had more than one child, please give
16
      information requested below on reverse side of this form.
17
          Name (first) ..... (middle) ..... (last), ..... (birth
              date), ..... (city and state of birth), ..... (sex),
18
19
              ..... (race).
20
          Name(s) of common parent(s) (first) .... (middle) .....
21
              (last), .... (race), (first) .... (middle)
22
              (last), .... (race).
23
          My child/parent/deceased spouse was surrendered
24
          adoption to ..... (name of agency) City and state of agency
25
                 Date .... (approximate) Other identifying
```

information (Please note that you must: (i) be at

22

23

1	least 21 years of age to register; (ii) submit with your
2	registration a certified copy of the adopted or surrendered
3	person's death certificate; (iii) if you are the child of a
4	deceased adopted or surrendered person, also submit a
5	certified copy of your birth certificate with this
6	registration; and (iv) if you are the surviving wife or
7	husband of a deceased adopted or surrendered person, also
8	submit a copy of your marriage certificate with this
9	registration. No application from a surviving relative of a
10	deceased adopted or surrendered person can be accepted if
11	the adopted or surrendered person filed a Denial of
12	Information Exchange prior to his or her death.)
13	
14	(signature of adopted or surrendered person's surviving
15	relative)
16	
17	(date) (printed name of adopted
18	person's surviving relative)
19	(d) The form of the Information Exchange Authorization
20	shall be substantially as follows:

INFORMATION EXCHANGE AUTHORIZATION

Registration Identification; that I am of the age of

I,, state that I am the person who completed the

years; that I hereby authorize the Department of Public Health to give to the following person(s) (birth mother) (birth father) (birth sibling) (adopted or surrendered person) (adoptive mother) (adoptive father) (legal guardian of an adopted or surrendered person) (birth aunt) (birth uncle) (adult child of a deceased adopted or surrendered person) (surviving spouse of a deceased adopted or surrendered person) (all eligible relatives) the following (please check the information authorized for exchange):

- [] 1. Only my name and last known address.
- 11 [] 2. A copy of my Illinois Adoption Registry
 12 Application.
 - [] 3. A copy of the <u>adopted or surrendered person's</u> original certificate of live birth <u>(check only if you are an adopted or surrendered person or the surviving adult child or surviving spouse of a deceased adopted or <u>surrendered person</u>).</u>
- 18 [] 4. A copy of my completed medical questionnaire.

I am fully aware that I can only be supplied with information about an individual or individuals who have duly executed an Information Exchange Authorization that has not been revoked or, if I am an adopted or surrendered person, from a birth parent who completed a Birth Parent Preference Form and did not prohibit the release of his or her identity to me; that I can be contacted by writing to: (own name or name of person to contact) (address) (phone number).

- 1 NOTE: New IARMIE registrants who do not complete a Medical
- 2 Information Exchange Questionnaire and release a copy of their
- 3 questionnaire to at least one Registry applicant must pay a \$15
- registration fee. 4
- 5 Dated (insert date).
- 6
- 7 (signature)

- 8 (e) The form of the Denial of Information Exchange shall be 9 substantially as follows:
- 10 DENIAL OF INFORMATION EXCHANGE
- 11 I,, state that I am the person who completed the 12 Registration Identification; that I am of the age of 1.3 years; that I hereby instruct the Department of Public Health 14 not to give any identifying information about me to the 15 following person(s) (birth mother) (birth father) 16 sibling) (adopted or surrendered person) (adoptive mother) (adoptive father) (legal guardian of an adopted or surrendered 17 person) (birth aunt) (birth uncle) (adult child of a deceased 18
- 20 adopted or surrendered person) (all eligible relatives).
- 21 IMPORTANT NOTE: A DENIAL FILED BY A BIRTH PARENT ON OR AFTER

adopted or surrendered person) (surviving spouse of a deceased

- 22 JANUARY 1, 2011, SHALL NOT PROHIBIT THE RELEASE OF THE BIRTH
- PARENT'S IDENTIFYING INFORMATION ON THE ORIGINAL BIRTH 23
- 24 CERTIFICATE OF AN ADULT ADOPTED OR SURRENDERED PERSON. BIRTH
- PARENTS WHO WISH TO PROHIBIT THE RELEASE OF THEIR IDENTIFYING 25

25 (signature)

1	INFORMATION ON THE ORIGINAL BIRTH CERTIFICATE OF AN ADULT
2	ADOPTED OR SURRENDERED PERSON SHALL FILE A BIRTH PARENT
3	PREFERENCE FORM ON OR AFTER JANUARY 1, 2011. DENIALS FILED BY A
4	BIRTH PARENT BEFORE JANUARY 1, 2011, WILL EXPIRE UPON THE DEATH
5	OF THE BIRTH PARENT WITH RESPECT TO ACCESS TO IDENTIFYING
6	INFORMATION ON THE ORIGINAL BIRTH CERTIFICATE RELEASED TO AN
7	ADULT ADOPTED OR SURRENDERED PERSON OR TO A SURVIVING ADULT
8	CHILD OR SURVIVING SPOUSE OF A DECEASED ADOPTED OR SURRENDERED
9	PERSON.
10	I do/do not (circle appropriate response) authorize the
11	Registry to release a copy of my completed Medical Information
12	Exchange Questionnaire to qualified Registry applicants. NOTE:
13	New IARMIE registrants who do not complete a Medical
14	Information Exchange Questionnaire and release a copy of their
15	questionnaire to at least one Registry applicant must pay a \$15
16	registration fee. Birth parents filing a Denial of Information
17	Exchange are advised that, under Illinois law, an adult adopted
18	person may initiate a search for a birth parent who has filed a
19	Denial of Information Exchange through the State confidential
20	intermediary program once 5 years have elapsed since the filing
21	of the Denial of Information Exchange; that I do not wish to be
22	contacted.
23	Dated (insert date).
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(f) The form of the Birth Parent Preference Form shall be substantially as follows:

In recognition of the basic right of all persons to access their birth records, Illinois law now provides for the release of original birth certificates to adopted and surrendered persons 21 years of age or older upon request. While many birth parents are comfortable sharing their identities or initiating contact with their birth sons and daughters once they have reached adulthood, Illinois law also recognizes that there may be unique situations where a birth parent might have a compelling reason for not wishing to establish contact with a birth son or daughter or for not wishing to release identifying information that appears on the original birth certificate of a birth son or daughter who has reached adulthood. The Illinois Adoption Registry and Medical Information Exchange (IARMIE) has therefore established this form to allow birth parents whose birth son or daughter was born on or after January 1, 1946, to express their wishes regarding contact and the sharing of identifying information listed on the original birth certificate with an adult adopted or surrendered person who has reached the age of 21.

In selecting one of the 5 options below, birth parents should keep in mind that the decision to deny an adult adopted or surrendered person access to identifying information on his or her original birth record and/or information about genetically-transmitted diseases is an important one that can

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impact the adopted or surrendered person's life in many ways. A request for anonymity on this form only pertains to information that is provided to an adult adopted or surrendered person or his or her surviving relatives through the Registry and does not prevent the disclosure of identifying information that may be available to the adoptee through his or her adoptive parents and/or other means available to him or her. Birth parents who would prefer not to be contacted by their surrendered son or daughter are strongly urged to complete both the Non-Identifying Information Section included on the final page of this document and the Medical Questionnaire in order to provide their surrendered son or daughter with the background information their surrendered son or daughter may need to better understand himself or herself and his or her origins. Furthermore, birth parents whose surrendered son or daughter is under 21 years of age at the time of completion of this form are reminded that, since no original birth certificates are released by the IARMIE before an adoptee has reached the age of 21, and birth parents are encouraged to take as much time as they need to weigh the options available to them before completing this form. Should you need additional assistance in completing this form, please contact the agency that handled the adoption, if applicable, or the Illinois Adoption Registry and Medical Information Exchange at 217-557-5159. After careful consideration, I, (insert your name), have made the following decision regarding contact with my

- birth son/birth daughter, (insert birth son's/birth daughter's 1 2 name at birth, if applicable), who was born in (insert 3 city/town of birth) on (insert date of birth)..... and the release of my identifying information as it appears on 4 5 his/her original birth certificate when he/she reaches the age of 21, and I have chosen Option (insert A, B, C, D, or E, 6 as applicable). I realize that this form must be accompanied by 7 8 a completed IARMIE application form as well as a Medical 9 Information Exchange Questionnaire or the \$15 registration 10 fee. I am also aware that I may revoke this decision at any 11 time by completing a new Birth Parent Preference Form and 12 filing it with the IARMIE. I understand that it is my responsibility to update the IARMIE with any changes to contact 13 14 information provided below. I also understand that, while preferences regarding the release of identifying information 15 16 through the Registry are binding unless the law should change in the future, any selection I have made regarding my preferred 17 18 method of contact is not. 19 20 (Signature/Date)
- 21 (Please insert your signature and today's date above, as well 22 as under your chosen option, A, B, C, D, or E below.)
- 23 Option A. I agree to the release of my identifying information as it appears on my birth son's/birth daughter's original birth 24

1	certificate, would welcome direct contact with my birth
2	son/birth daughter when he or she has reached the age of 21 and
3	I wish to be contacted at the following mailing address, email
4	address or phone number:
5	<u></u>
6	<u></u>
7	<u></u>
8	<u></u>
9	(Signature/Date)
10	Option B. I agree to the release of my identifying information
11	as it appears on my birth son's/birth daughter's original birth
12	certificate, would welcome contact with my birth son/birth
13	daughter when he or she has reached the age of 21, but I would
14	prefer to be contacted through the following person. (Insert
15	name and mailing address, email address or phone number of
16	<pre>chosen contact person.)</pre>
17	<u></u>
18	<u></u>
19	(Signature/Date)
20	Option C. I agree to the release of my name as it appears on my
21	birth son's/birth daughter's original birth certificate, would
22	welcome contact with my birth son/birth daughter when he or she
23	has reached the age of 21, but I would prefer to be contacted
24	through the Illinois confidential intermediary program (please

call 800-526-9022 for additional information) or through the
agency that handled the adoption. (Insert agency name, address
and phone number, if applicable.)
<u></u>
(Signature/Date)
Option D. I agree to the release of my name as it appears on my
birth son's/birth daughter's original birth certificate, but I
would prefer not to be contacted by my birth son/birth daughter
when he or she has reached the age of 21.
<u></u>
(Signature/Date)
(Signature/Date)
(Signature/Date) Option E. I wish to prohibit the release of my (circle ALI
Option E. I wish to prohibit the release of my (circle ALI
Option E. I wish to prohibit the release of my (circle ALI applicable options) first name, last name, last known address,
Option E. I wish to prohibit the release of my (circle ALL applicable options) first name, last name, last known address, birth son/birth daughter's last name (if last name listed is
Option E. I wish to prohibit the release of my (circle ALI applicable options) first name, last name, last known address, birth son/birth daughter's last name (if last name listed is same as mine), as they appear on my birth son's/birth
Option E. I wish to prohibit the release of my (circle ALI applicable options) first name, last name, last known address, birth son/birth daughter's last name (if last name listed is same as mine), as they appear on my birth son's/birth daughter's original birth certificate and do not wish to be
Option E. I wish to prohibit the release of my (circle ALI applicable options) first name, last name, last known address, birth son/birth daughter's last name (if last name listed is same as mine), as they appear on my birth son's/birth daughter's original birth certificate and do not wish to be contacted by my birth son/birth daughter when he or she has
Option E. I wish to prohibit the release of my (circle ALI applicable options) first name, last name, last known address, birth son/birth daughter's last name (if last name listed is same as mine), as they appear on my birth son's/birth daughter's original birth certificate and do not wish to be contacted by my birth son/birth daughter when he or she has reached the age of 21. If there were any special circumstances
Option E. I wish to prohibit the release of my (circle ALI applicable options) first name, last name, last known address, birth son/birth daughter's last name (if last name listed is same as mine), as they appear on my birth son's/birth daughter's original birth certificate and do not wish to be contacted by my birth son/birth daughter when he or she has reached the age of 21. If there were any special circumstances that played a role in your decision to remain anonymous which
Option E. I wish to prohibit the release of my (circle ALI applicable options) first name, last name, last known address, birth son/birth daughter's last name (if last name listed is same as mine), as they appear on my birth son's/birth daughter's original birth certificate and do not wish to be contacted by my birth son/birth daughter when he or she has reached the age of 21. If there were any special circumstances that played a role in your decision to remain anonymous which you would like to share with your birth son/birth daughter,

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1	I understand that, although I have chosen to prohibit the
2	release of my identity on the copy of the original birth
3	certificate released to my birth son/birth daughter, he or she
4	may request that a court-appointed confidential intermediary
5	contact me to request updated medical information and/or
6	confirm my desire to remain anonymous once 5 years have elapsed
7	since the signing of this form; at the time of this subsequent
8	search, I wish to be contacted through the person named below.
9	(Insert in blank area below the name and phone number of the
10	contact person, or leave it blank if you wish to be contacted
11	directly.) I also understand that this request for anonymity
12	shall expire upon my death.
13	<u></u>
14	<u></u>
15	(Signature/Date)

NOTE: A copy of this form will be forwarded to your birth son or daughter should he or she file a request for his or her original birth certificate with the IARMIE. However, if you have selected Option E, identifying information, per your specifications above, will be deleted from the copy of this form forwarded to your birth son or daughter during your lifetime. In the event that an adopted or surrendered person is deceased, his or her surviving adult children may request a copy of the adopted or surrendered person's original birth certificate providing they have registered with the IARMIE; the

1	copy of this form and the non-certified copy of the original
2	birth certificate forwarded to the surviving child of the
3	adopted or surrendered person shall be redacted per your
4	specifications on this form during your lifetime.
5	Non-Identifying Information Section
6	I wish to voluntarily provide the following non-identifying
7	information to my surrendered son or daughter:
8	My age at the time of my child's birth was
9	My race is best described as:
10	My height is:
11	My body type is best described as (circle one): slim, average,
12	muscular, a few extra pounds, or more than a few extra pounds.
13	My natural hair color is/was:
14	My eye color is:
15	My religion is best described as:
16	My ethnic background is best described as:
17	My educational level is closest to (circle applicable
18	response): completed elementary school, graduated from
19	high school, attended college, earned bachelor's degree,
20	earned master's degree, earned doctoral degree.
21	My occupation is best described as
22	My hobbies include
23	My interests include
24	My talents include
25	In addition to my surrendered son or daughter, I also

26 am the biological parent of (insert number) boys and

1	(insert number)	 girls,	of whom	(insert	number)	

- 2 are still living.
- 3 The relationship between me and my child's birth mother/birth
- 4 father would best be described as (circle appropriate
- 5 response): husband and wife, ex-spouses, boyfriend and
- girlfriend, casual acquaintances, other (please specify) 6
- 7

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- 8 (q) The form of the Request for a Non-Certified Copy of an
- 9 Original Birth Certificate shall be substantially as follows:
- 10 REQUEST FOR A NON-CERTIFIED COPY OF AN ORIGINAL BIRTH
- 11 CERTIFI<u>CATE</u>
- 12 I, (requesting party's full name), hereby request a non-certified copy of (check appropriate option) my 13 14 original birth certificate the original birth certificate of my deceased adopted or surrendered parent 15 16 the original birth certificate of my deceased adopted or 17 surrendered spouse (insert deceased parent's/deceased spouse's name at adoption) I/my deceased parent/my deceased 18 19 spouse was born in (insert city and county of adopted or 20 surrendered person's birth) on (insert adopted or surrendered person's date of birth). In the event that one or 21 22 both of my/my deceased parent's/my deceased spouse's birth 23 parents has requested that their identity not be released to 24 me/to my deceased parent/to my deceased spouse, I wish to

(check appropriate option) a. receive a non-certified

copy of the original birth certificate from which identifying

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1	information pertaining to the birth parent who requested
2	anonymity has been deleted; or b. I do not wish to
3	received an altered copy of the original birth certificate.
4	Dated (insert date).
5	<u></u>
6	(signature)
7	(h) Any (f) The Information Exchange Authorization, and the
8	Denial of Information Exchange, or Birth Parent Preference Form
9	filed with the Registry, or Request for a Non-Certified Copy of
10	an Original Birth Certificate filed with the Registry by a
11	surviving adult child or surviving spouse of a deceased adopted
12	or surrendered person, shall be acknowledged by the person who
13	filed it birth parent, birth sibling, adopted or surrendered
14	person, adoptive parent, or legal guardian before a notary
15	public, in form substantially as follows:
16	State of
17	County of
18	I, a Notary Public, in and for the said County, in the
19	State aforesaid, do hereby certify that
20	personally known to me to be the same person whose name is
21	subscribed to the foregoing certificate of acknowledgement,
22	appeared before me in person and acknowledged that (he or she)
23	signed such certificate as (his or her) free and voluntary act

Given under my hand and notarial seal on (insert date).

and that the statements in such certificate are true.

1	• • • • • • • • • • • • • • • • • • • •
2	(signature)
3	(i) (g) When the execution of an Information Exchange
4	Authorization, or a Denial of Information Exchange, or Birth
5	Parent Preference Form or Request for a Non-Certified Copy of
6	an Original Birth Certificate completed by a surviving adult
7	child or surviving spouse of a deceased adopted or surrendered
8	person is acknowledged before a representative of an agency,
9	such representative shall have his signature on said
10	Certificate acknowledged before a notary public, in form
11	substantially as follows:
12	State of
13	County of
14	I, a Notary Public, in and for the said County, in the
15	State aforesaid, do hereby certify that personally known
16	to me to be the same person whose name is subscribed to the
17	foregoing certificate of acknowledgement, appeared before me
18	in person and acknowledged that (he or she) signed such
19	certificate as (his or her) free and voluntary act and that the
20	statements in such certificate are true.
21	Given under my hand and notarial seal on (insert date).
22	
23	(signature)

(j) (h) When an Illinois Adoption Registry Application,

- Information Exchange Authorization $\underline{}$ or $\underline{}$ Denial of Information 1
- 2 Exchange, Birth Parent Preference Form, or Request for a
- Non-Certified Copy of an Original Birth Certificate completed 3
- by a surviving adult child or surviving spouse of a deceased 4
- 5 adopted or surrendered person is executed in a foreign country,
- the execution of such document shall be acknowledged or 6
- 7 affirmed before an officer of the United States consular
- 8 services.
- 9 (k) (i) If the person signing an Information Exchange
- 10 Authorization, or a Denial of Information, Birth Parent
- 11 Preference Form, or Request for a Non-Certified Copy of an
- 12 Original Birth Certificate completed by a surviving adult child
- or surviving spouse of a deceased adopted or surrendered person 13
- 14 is in the military service of the United States, the execution
- 15 of such document may be acknowledged before a commissioned
- 16 officer and the signature of such officer on such certificate
- 17 shall be verified or acknowledged before a notary public or by
- such other procedure as is then in effect for such division or 18
- branch of the armed forces. 19
- 20 (1) An adopted or surrendered person who completes a
- 21 Request For a Non-Certified Copy of the Original Birth
- 22 Certificate shall meet the same filing requirements and pay the
- 23 same filing fees as a non-adopted person seeking to obtain a
- copy of his or her <u>original birth certificate</u>. 24
- 25 (i) The Department shall modify these forms as necessary to
- 26 implement the provisions of this amendatory Act of 1999

- including creating Registration Identification Forms 1
- 2 non-surrendered birth siblings, adoptive parents and legal
- 3 quardians.
- (Source: P.A. 93-189, eff. 1-1-04; 94-173, eff. 1-1-06.) 4
- 5 (750 ILCS 50/18.3) (from Ch. 40, par. 1522.3)

6 Sec. 18.3. (a) The agency, Department of Children and Family Services, Court Supportive Services, Juvenile Division 7 8 of the Circuit Court, and any other party to the surrender of a 9 child for adoption or in an adoption proceeding shall inform 10 obtain from any birth parent or parents relinquishing giving up 11 a child for purposes of adoption after the effective date of this Act of the opportunity to register with the Illinois 12 1.3 Adoption Registry and Medical Information Exchange and to utilize the Illinois confidential intermediary program and 14 15 shall obtain a written confirmation that acknowledges the birth 16 parent's receipt of such information. a written statement which indicates: (1) a desire to have identifying information shared 17 18 with the adopted or surrendered person at a later date; (2) a 19 desire not to have identifying information revealed; or (3) 20 that no decision is made at that time. In addition, the agency, 21 Department of Children and Family Services, Court Supportive 22 Services, Juvenile Division of the Circuit Court, and any other organization involved in the surrender of a child for adoption 23 in an adoption proceeding shall inform the birth parent or 24 25 parents of a child born, adopted or surrendered in Illinois of

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Informa	tion	Excha	nge a	ind p	orovide	them	with	the	neces	sary
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the for	ms.									

- (b) When the written statement is signed, the birth parent or parents shall be informed in writing that their decision regarding the sharing of identifying information can be made or changed by such birth parent or parents at any future date.
- (c) The birth parent shall be informed in writing that if contact or exchange of identifying sharing of identifying information with the adult adopted or surrendered person is to occur, that adult adopted or surrendered person he or she must be 21 years of age or over.
- (d) If the birth parent or parents indicate a desire to share identifying information with the adopted or surrendered person, the birth parent shall complete an Information Exchange Authorization.
- (e) Any birth parent or parents requesting that no identifying information be revealed to the adopted or surrendered person shall be informed that such request will be conveyed to the adopted or surrendered person if he or she requests such information; and such identifying information shall not be revealed.
- (f) Any adopted or surrendered person 21 years of age or over may also indicate in writing his or her desire or lack of desire to share identifying information with the birth parent

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or parents or with one or more of his or her birth relatives. Any adopted or surrendered person requesting that identifying information be revealed to the birth parent or to one or more of his or her birth relatives shall be informed that such request shall be conveyed to the birth parent or birth relative if he or she requests such information; and such identifying information shall not be revealed.

(b) (a) Any birth parent, birth sibling, adopted or surrendered person, adoptive parent, or legal quardian indicating their desire to receive identifying or medical information shall be informed of the existence of the Registry and assistance shall be given to such person to legally record his or her name with the Registry.

(c) (h) The agency, Department of Children and Family Services, Court Supportive Services, Juvenile Division of the Circuit Court, and any other organization involved in the surrender of a child for adoption in an adoption proceeding which has written statements from an adopted or surrendered person and the birth parent or a birth sibling indicating a desire to share receive identifying information or establish contact shall supply such information to the mutually consenting parties, except that no identifying information shall be supplied to consenting birth siblings if any such sibling is under 21 years of age. However, both the Registry Information Exchange Authorization and organization having a written statement requesting the sharing

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of identifying information or contact shall communicate with

each other to determine if the adopted or surrendered person or

the birth parent or birth sibling has signed a form at a later

date indicating a change in his or her desires regarding the

sharing of information or contact. The agreement of the birth

parent shall be binding.

7 $\underline{\text{(d)}}$ On and after January 1, 2000, any licensed child

welfare agency which provides post-adoption search assistance

to adoptive parents, adopted persons, surrendered persons,

birth parents, or other birth relatives shall require that any

person requesting post-adoption search assistance complete an

Illinois Adoption Registry Application prior to the

13 commencement of the search.

14 (Source: P.A. 94-173, eff. 1-1-06.)

15 (750 ILCS 50/18.3a) (from Ch. 40, par. 1522.3a)

Sec. 18.3a. Confidential intermediary.

17 (a) General purposes. Notwithstanding any other provision

of this Act, any adopted or surrendered person 21 years of age

or over, any adoptive parent or legal guardian of an adopted or

surrendered person under the age of 21, or any birth parent of

an adopted or surrendered person who is 21 years of age or over

may petition the court in any county in the State of Illinois

for appointment of a confidential intermediary as provided in

this Section for the purpose of exchanging medical information

with one or more mutually consenting biological relatives,

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obtaining identifying information about one or more mutually consenting biological relatives, or arranging contact with one mutually consenting biological relatives. or more Additionally, in cases where an adopted or surrendered person is deceased, an adult child of the adopted or surrendered person or his or her adoptive parents or surviving spouse may file a petition under this Section and in cases where the birth parent is deceased, an adult birth sibling of the adopted or surrendered person or of the deceased birth parent may file a petition under this Section for the purpose of exchanging medical information with one or more mutually consenting biological relatives of the adopted or surrendered person, obtaining identifying information about one or more mutually consenting biological relatives of the adopted or surrendered person, or arranging contact with one or more mutually consenting biological relatives of the adopted or surrendered person. Beginning January 1, 2006, any adopted or surrendered person 21 years of age or over; any adoptive parent or legal quardian of an adopted or surrendered person under the age of 21; any birth parent, birth sibling, birth aunt, or birth uncle of an adopted or surrendered person over the age of 21; any surviving child, adoptive parent, or surviving spouse of a deceased adopted or surrendered person who wishes to petition the court for the appointment of a confidential intermediary shall be required to accompany their petition with proof of registration with the Illinois Adoption Registry and Medical

Information Exchange.

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- 2 (b) Petition. Upon petition by an adopted or surrendered 3 person 21 years of age or over (an "adult adopted or surrendered person"), an adoptive parent or legal quardian of 4 5 an adopted or surrendered person under the age of 21, or a birth parent of an adopted or surrendered person who is 21 6 7 years of age or over, the court shall appoint a confidential 8 intermediary. Upon petition by an adult child, adoptive parent 9 or surviving spouse of an adopted or surrendered person who is 10 deceased, by an adult birth sibling of an adopted or 11 surrendered person whose common birth parent is deceased and 12 whose adopted or surrendered birth sibling is 21 years of age or over, or by an adult sibling of a birth parent who is 13 14 deceased, and whose surrendered child is 21 years of age or 15 over, the court may appoint a confidential intermediary if the 16 court finds that the disclosure is of greater benefit than 17 nondisclosure. The petition shall state which biological relative or relatives are being sought and shall indicate if 18 19 the petitioner wants to do any one or more of the following: exchange medical information with the biological relative or 20 21 relatives, obtain identifying information from the biological relative or relatives, or to arrange contact with the 22 23 biological relative.
 - Order. The order appointing the confidential intermediary shall allow that intermediary to conduct a search for the sought-after relative by accessing those records

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- described in subsection (q) of this Section. 1
- (d) Fees and expenses. The court shall condition the appointment of the confidential intermediary the petitioner's payment of the intermediary's fees and expenses in advance of the commencement of the work of the confidential intermediary. However, no fee shall be charged if the 7 petitioner is an adult adopted or surrendered person and the sought-after relative is a birth parent who filed a Denial with the Registry prior to January 1, 2011, or filed a Birth Parent Preference Form on which Option E was selected after January 1, 2011 and more than 5 years have transpired since the birth parent filed the Denial of Information Exchange or Birth Parent Preference Form on which Option E was selected.
 - (e) Eligibility of intermediary. The court may appoint as confidential intermediary any person certified by Department of Children and Family Services as qualified to serve as a confidential intermediary. Certification shall be dependent upon the confidential intermediary completing a course of training including, but not limited to, applicable federal and State privacy laws.
 - Confidential Intermediary Council. There shall be established under the Department of Children and Family Services a Confidential Intermediary Advisory Council. One member shall be an attorney representing the Attorney General's Office appointed by the Attorney General. One member shall be a currently certified confidential intermediary appointed by the

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Director of the Department of Children and Family Services. The Director shall also appoint 5 additional members. When making those appointments, the Director shall consider advocates for adopted persons, adoptive parents, birth parents, lawyers who represent clients in private adoptions, lawyers specializing in privacy law, and representatives of agencies involved in adoptions. The Director shall appoint one of the 7 members as the chairperson. An attorney from the Department of Children and Family Services and the person directly responsible for administering the confidential intermediary program shall serve as ex-officio, non-voting advisors to the Council. Council members shall serve at the discretion of the Director and shall receive no compensation other than reasonable expenses approved by the Director. The Council shall meet no less than twice yearly and shall meet at least once yearly with the Registry Advisory Council, and shall make recommendations to the Director regarding the development of rules, procedures, and forms that will ensure efficient and effective operation of the confidential intermediary process, including:

- for certification for confidential (1)Standards intermediaries.
- (2) Oversight of methods used to verify that intermediaries are complying with the appropriate laws.
 - (3) Training for confidential intermediaries, including training with respect to federal and State privacy laws.

- 1 (4) The relationship between confidential
- 2 intermediaries and the court system, including the
- 3 development of sample orders defining the scope of the
- 4 intermediaries' access to information.
- 5 (5) Any recent violations of policy or procedures by
- 6 confidential intermediaries and remedial steps, including
- decertification, to prevent future violations.
- 8 (g) Access. Subject to the limitations of subsection (i)
- 9 of this Section, the confidential intermediary shall have
- 10 access to vital records or a comparable public entity that
- 11 maintains vital records in another state in accordance with
- 12 <u>that state's laws,</u> maintained by the Department of Public
- 13 Health and its local designees for the maintenance of vital
- 14 records or a comparable public entity that maintains vital
- 15 records in another state in accordance with that state's laws
- and all records of the court or any adoption agency, public or
- 17 private, as limited in this Section, which relate to the
- 18 adoption or the identity and location of an adopted or
- 19 surrendered person, of an adult child or surviving spouse of a
- deceased adopted or surrendered person, or of a birth parent,
- 21 birth sibling, or the sibling of a deceased birth parent. The
- 22 confidential intermediary shall not have access to any personal
- 23 health information protected by the Standards for Privacy of
- 24 Individually Identifiable Health Information adopted by the
- U.S. Department of Health and Human Services under the Health
- 26 Insurance Portability and Accountability Act of 1996 unless the

confidential intermediary has obtained written consent from 1 2 the person whose information is being sought by an adult adopted or surrendered person or, if that person is a minor 3 child, that person's parent or quardian. Confidential 5 intermediaries shall be authorized to inspect confidential 6 relinguishment and adoption records. The confidential 7 intermediary shall not be authorized to access medical records, financial records, credit records, banking records, home 8 9 studies, attorney file records, or other personal records. In 10 cases where a birth parent is being sought, an adoption agency 11 shall inform the confidential intermediary of any statement 12 filed pursuant to Section 18.3, hereinafter referred to as "the 18.3 statement", indicating a desire of the surrendering birth 13 parent to have identifying information shared or to not have 14 15 identifying information shared. If there was a clear statement 16 intent by the sought-after birth parent not to have 17 identifying information shared, the confidential intermediary shall discontinue the search and inform the petitioning party 18 19 of the sought-after relative's intent unless the birth parent 20 filed the 18.3 statement prior to the effective date of this amendatory Act of the 96th General Assembly and more than 5 21 22 years have elapsed since the filing of the 18.3 statement. If 23 the adult adopted or surrendered person is the subject of an 24 18.3 statement indicating a desire not to establish contact 25 which was filed more than 5 years prior to the search request, the confidential intermediary shall confirm the petitioner's 26

- desire to continue the search. Information provided to the confidential intermediary by an adoption agency shall be restricted to the full name, date of birth, place of birth, last known address, last known telephone number of the sought-after relative or, if applicable, of the children or siblings of the sought-after relative, and the 18.3 statement.
 - (h) Adoption agency disclosure of medical information. If the petitioner is an adult adopted or surrendered person or the adoptive parent of a minor and if the petitioner has signed a written authorization to disclose personal medical information, an adoption agency disclosing information to a confidential intermediary shall disclose available medical information about the adopted or surrendered person from birth through adoption.
- (i) Duties of confidential intermediary in conducting a search. In conducting a search under this Section, the confidential intermediary shall first confirm that there is no Denial of Information Exchange on file with the Illinois Adoption Registry. If the petitioner is an adult child of an adopted or surrendered person who is deceased, the confidential intermediary shall additionally confirm that the adopted or surrendered person did not file a Denial of Information Exchange with the Illinois Adoption Registry during his or her life. If there is a Denial on file with the Registry, the confidential intermediary must discontinue the search unless the petitioner is an adult adopted or surrendered person and

the sought-after birth relative filed the Denial 5 years or 1 2 more prior to the search or the birth parent has not been the 3 object of a search through the State confidential intermediary program for 10 or more years. If the petitioner is an adult 4 5 adopted or surrendered person and there is a Birth Parent Preference Form on file with the Registry and the birth parent 6 7 who completed the form selected Option E, the confidential 8 intermediary must discontinue the search unless 5 years or more 9 have elapsed since the filing of the Birth Parent Preference 10 Form. If the petitioner is an adult birth sibling of an adopted 11 or surrendered person or an adult sibling of a birth parent who 12 is deceased, the confidential intermediary shall additionally confirm that the birth parent did not file a Denial of 13 14 Information Exchange with the Registry during his or her life. 15 If the confidential intermediary learns that a sought-after 16 birth parent signed an 18.3 ± 3 statement indicating his or her intent not to have identifying information shared, and did not 17 later file an Information Exchange Authorization or a Birth 18 19 Parent Preference Form with the Adoption Registry, 20 confidential intermediary shall discontinue the search and inform the petitioning party of the birth parent's intent, 21 22 unless the petitioner is an adult adopted or surrendered person 23 and 5 years or more have elapsed since the birth parent signed 24 the statement indicating his or her intent not to have 25 identifying information shared. In cases where the birth parent filed a Denial of Information Exchange or Birth Parent 26

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In conducting a search under this Section, the confidential intermediary shall attempt to locate the relative or relatives from whom the petitioner has requested information. If the sought-after relative is deceased or cannot be located after a diligent search, the confidential intermediary may contact other adult relatives of the sought-after relative.

The confidential intermediary shall contact a sought-after relative on behalf of the petitioner in a manner that respects

the sought-after relative's privacy and shall inform the sought-after relative of the petitioner's request for medical information, identifying information or contact as stated in the petition. Based upon the terms of the petitioner's request, the confidential intermediary shall contact a sought-after relative on behalf of the petitioner and inform the sought-after relative of the following options:

- (1) The sought-after relative may totally reject one or all of the requests for medical information, identifying information or contact. The sought-after relative shall be informed that they can provide a medical questionnaire to be forwarded to the petitioner without releasing any identifying information. The confidential intermediary shall inform the petitioner of the sought-after relative's decision to reject the sharing of information or contact.
- (2) The sought-after relative may consent to completing a medical questionnaire only. In this case, the confidential intermediary shall provide the questionnaire and ask the sought-after relative to complete it. The confidential intermediary shall forward the completed questionnaire to the petitioner and inform the petitioner of the sought-after relative's desire to not provide any additional information.
- (3) The sought-after relative may communicate with the petitioner without having his or her identity disclosed. In this case, the confidential intermediary shall arrange the

desired communication in a manner that protects the identity of the sought-after relative. The confidential intermediary shall inform the petitioner of the

sought-after relative's decision to communicate but not

5 disclose his or her identity.

(4) The sought after relative may consent to initiate contact with the petitioner. If both the petitioner and the sought-after relative or relatives are eligible to register with the Illinois Adoption Registry, the confidential intermediary shall provide the necessary application forms and request that the sought-after relative register with the Illinois Adoption Registry. If either the petitioner or the sought-after relative or relatives are ineligible to register with the Illinois Adoption Registry, the confidential intermediary shall obtain written consents from both parties that they wish to disclose their identities to each other and to have contact with each other.

- (j) Oath. The confidential intermediary shall sign an oath of confidentiality substantially as follows: "I,, being duly sworn, on oath depose and say: As a condition of appointment as a confidential intermediary, I affirm that:
 - (1) I will not disclose to the petitioner, directly or indirectly, any confidential information except in a manner consistent with the law.
 - (2) I recognize that violation of this oath subjects me

to civil liability and to a potential finding of contempt of court.....

3 SUBSCRIBED AND SWORN to before me, a Notary Public, on (insert date)

(k) Sanctions.

- (1) Any confidential intermediary who improperly discloses confidential information identifying a sought-after relative shall be liable to the sought-after relative for damages and may also be found in contempt of court.
- (2) Any person who learns a sought-after relative's identity, directly or indirectly, through the use of procedures provided in this Section and who improperly discloses information identifying the sought-after relative shall be liable to the sought-after relative for actual damages plus minimum punitive damages of \$10,000.
- (3) The Department shall fine any confidential intermediary who improperly discloses confidential information in violation of item (1) or (2) of this subsection (k) an amount up to \$2,000 per improper disclosure. This fine does not affect civil liability under item (2) of this subsection (k). The Department shall deposit all fines and penalties collected under this Section into the Illinois Adoption Registry and Medical Information Fund.

- (1) Death of person being sought. Notwithstanding any other provision of this Act, if the confidential intermediary discovers that the person being sought has died, he or she shall report this fact to the court, along with a copy of the death certificate. If the sought-after relative is a birth parent, the confidential intermediary shall also forward a copy of the birth parent's death certificate, if available, to the Registry for inclusion in the Registry file.
- (m) Any confidential information obtained by the confidential intermediary during the course of his or her search shall be kept strictly confidential and shall be used for the purpose of arranging contact between the petitioner and the sought-after birth relative. At the time the case is closed, all identifying information shall be returned to the court for inclusion in the impounded adoption file.
- (n) If the petitioner is an adopted or surrendered person 21 years of age or over or the adoptive parent or legal guardian of an adopted or surrendered person under the age of 21, any non-identifying information, as defined in Section 18.4, that is ascertained during the course of the search may be given in writing to the petitioner at any time during the search before the case is closed.
- (o) Except as provided in subsection (k) of this Section, no liability shall accrue to the State, any State agency, any judge, any officer or employee of the court, any certified confidential intermediary, or any agency designated to oversee

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1 confidential intermediary services for acts, omissions, or 2 efforts made in good faith within the scope of this Section.

- (p) An adoption agency that has received a request from a confidential intermediary for the full name, date of birth, last known address, or last known telephone number of a sought-after relative pursuant to subsection (g) of Section 18.3a 18.3, or for medical information regarding a sought-after relative pursuant to subsection (h) of Section 18.3a 18.3, must satisfactorily comply with this court order within a period of 45 days. The court shall order the adoption agency to reimburse the petitioner in an amount equal to all payments made by the petitioner to the confidential intermediary, and the adoption agency shall be subject to a civil monetary penalty of \$1,000 to be paid to the Department of Children and Family Services. Following the issuance of a court order finding that the adoption agency has not complied with Section 18.3, adoption agency shall be subject to a monetary penalty of \$500 per day for each subsequent day of non-compliance. Proceeds from such fines shall be utilized by the Department of Children and Family Services to subsidize the fees of petitioners as referenced in subsection (d) of this Section.
- (q) Provide information to eligible petitioner. The confidential intermediary may provide to eligible petitioners as described in subsections (a) and (b) of this Section, the name of the child welfare agency which had legal custody of the surrendered person or responsibility for placing the

- 1 surrendered person and any available contact information for
- 2 such agency. In addition, the confidential intermediary may
- 3 provide to such petitioners the name of the state in which the
- 4 surrender occurred or in which the adoption was finalized.
- 5 Any reimbursements and fines, notwithstanding any
- 6 reimbursement directly to the petitioner, paid under this
- 7 subsection are in addition to other remedies a court may
- 8 otherwise impose by law.
- 9 Proceeds from the penalties paid to the Department of
- 10 Children and Family Services shall be deposited into the DCFS
- 11 Children's Services Fund. The Department of Children and Family
- 12 Services shall submit reports to the Confidential Intermediary
- 13 Advisory Council by July 1 and January 1 of each year in order
- 14 to report the penalties assessed and collected under this
- 15 subsection, the amounts of related deposits into the DCFS
- 16 Children's Services Fund, and any expenditures from such
- deposits.
- 18 (Source: P.A. 96-661, eff. 8-25-09.)
- 19 (750 ILCS 50/18.5) (from Ch. 40, par. 1522.5)
- Sec. 18.5. Liability. No liability shall attach to the
- 21 State, any agency thereof, any licensed agency, any judge, any
- officer or employee of the court, or any party or employee
- 23 thereof involved in the surrender of a child for adoption or in
- 24 an adoption proceeding for acts or efforts made within the
- 25 scope of Sections 18.05 thru 18.5, inclusive, of this Act and

- under its provisions, except for subsection (n) (f) of Section
- 2 18.1.
- 3 (Source: P.A. 91-417, eff. 1-1-00.)
- 4 (750 ILCS 50/18.6) (from Ch. 40, par. 1522.6)
- 5 Sec. 18.6. Registry fees. The Department of Public Health
- 6 shall levy a fee for each registrant under Sections 18.05
- 7 through 18.5. A \$15 \$40 fee shall be charged for registering
- 8 with the Illinois Adoption Registry and Medical Information
- 9 Exchange. However, this fee shall be waived for all adopted or
- 10 surrendered persons, surviving children and spouses of
- 11 deceased adopted persons, adoptive parents, legal guardians,
- 12 birth parents, and birth siblings who complete a Medical
- 13 Information Exchange Questionnaire at the time of registration
- and authorize its release to specified registered parties, and
- 15 for adoptive parents registering within 12 months of the
- finalization of the adoption. All persons who were registered
- 17 with the Illinois Adoption Registry prior to the effective date
- of this amendatory Act of 1999 and who wish to update their
- 19 registration may do so without charge. No charge of any kind
- 20 shall be made for the withdrawal of any form provided in
- 21 Section 18.2.
- 22 (Source: P.A. 91-417, eff. 1-1-00.)
- 23 Section 99. Effective date. This Act takes effect upon
- 24 becoming law.