

1 AN ACT concerning government.

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

4 Section 5. The Civil Administrative Code of Illinois is
5 amended by changing Section 5-565 as follows:

6 (20 ILCS 5/5-565) (was 20 ILCS 5/6.06)

7 Sec. 5-565. In the Department of Public Health.

8 (a) The General Assembly declares it to be the public
9 policy of this State that all citizens of Illinois are entitled
10 to lead healthy lives. Governmental public health has a
11 specific responsibility to ensure that a public health system
12 is in place to allow the public health mission to be achieved.
13 The public health system is the collection of public, private,
14 and voluntary entities as well as individuals and informal
15 associations that contribute to the public's health within the
16 State. To develop a public health system requires certain core
17 functions to be performed by government. The State Board of
18 Health is to assume the leadership role in advising the
19 Director in meeting the following functions:

20 (1) Needs assessment.

21 (2) Statewide health objectives.

22 (3) Policy development.

23 (4) Assurance of access to necessary services.

1 There shall be a State Board of Health composed of 19
2 persons, all of whom shall be appointed by the Governor, with
3 the advice and consent of the Senate for those appointed by the
4 Governor on and after June 30, 1998, and one of whom shall be a
5 senior citizen age 60 or over. Five members shall be physicians
6 licensed to practice medicine in all its branches, one
7 representing a medical school faculty, one who is board
8 certified in preventive medicine, and one who is engaged in
9 private practice. One member shall be a chiropractic physician.
10 One member shall be a dentist; one an environmental health
11 practitioner; one a local public health administrator; one a
12 local board of health member; one a registered nurse; one a
13 physical therapist; one a veterinarian; one a public health
14 academician; one a health care industry representative; one a
15 representative of the business community; one a representative
16 of the non-profit public interest community; and 2 shall be
17 citizens at large.

18 The terms of Board of Health members shall be 3 years,
19 except that members shall continue to serve on the Board of
20 Health until a replacement is appointed. Upon the effective
21 date of this amendatory Act of the 93rd General Assembly, in
22 the appointment of the Board of Health members appointed to
23 vacancies or positions with terms expiring on or before
24 December 31, 2004, the Governor shall appoint up to 6 members
25 to serve for terms of 3 years; up to 6 members to serve for
26 terms of 2 years; and up to 5 members to serve for a term of one

1 year, so that the term of no more than 6 members expire in the
2 same year. All members shall be legal residents of the State of
3 Illinois. The duties of the Board shall include, but not be
4 limited to, the following:

5 (1) To advise the Department of ways to encourage
6 public understanding and support of the Department's
7 programs.

8 (2) To evaluate all boards, councils, committees,
9 authorities, and bodies advisory to, or an adjunct of, the
10 Department of Public Health or its Director for the purpose
11 of recommending to the Director one or more of the
12 following:

13 (i) The elimination of bodies whose activities are
14 not consistent with goals and objectives of the
15 Department.

16 (ii) The consolidation of bodies whose activities
17 encompass compatible programmatic subjects.

18 (iii) The restructuring of the relationship
19 between the various bodies and their integration
20 within the organizational structure of the Department.

21 (iv) The establishment of new bodies deemed
22 essential to the functioning of the Department.

23 (3) To serve as an advisory group to the Director for
24 public health emergencies and control of health hazards.

25 (4) To advise the Director regarding public health
26 policy, and to make health policy recommendations

1 regarding priorities to the Governor through the Director.

2 (5) To present public health issues to the Director and
3 to make recommendations for the resolution of those issues.

4 (6) To recommend studies to delineate public health
5 problems.

6 (7) To make recommendations to the Governor through the
7 Director regarding the coordination of State public health
8 activities with other State and local public health
9 agencies and organizations.

10 (8) To report on or before February 1 of each year on
11 the health of the residents of Illinois to the Governor,
12 the General Assembly, and the public.

13 (9) To review the final draft of all proposed
14 administrative rules, other than emergency or preemptory
15 rules and those rules that another advisory body must
16 approve or review within a statutorily defined time period,
17 of the Department after September 19, 1991 (the effective
18 date of Public Act 87-633). The Board shall review the
19 proposed rules within 90 days of submission by the
20 Department. The Department shall take into consideration
21 any comments and recommendations of the Board regarding the
22 proposed rules prior to submission to the Secretary of
23 State for initial publication. If the Department disagrees
24 with the recommendations of the Board, it shall submit a
25 written response outlining the reasons for not accepting
26 the recommendations.

1 In the case of proposed administrative rules or
2 amendments to administrative rules regarding immunization
3 of children against preventable communicable diseases
4 designated by the Director under the Communicable Disease
5 Prevention Act, after the Immunization Advisory Committee
6 has made its recommendations, the Board shall conduct 3
7 public hearings, geographically distributed throughout the
8 State. At the conclusion of the hearings, the State Board
9 of Health shall issue a report, including its
10 recommendations, to the Director. The Director shall take
11 into consideration any comments or recommendations made by
12 the Board based on these hearings.

13 (10) To deliver to the Governor for presentation to the
14 General Assembly a State Health Improvement Plan. The first
15 and second such plans shall be delivered to the Governor on
16 January 1, 2006 and on January 1, 2009 respectively, and
17 then every 4 years thereafter.

18 The Plan shall recommend priorities and strategies to
19 improve the public health system and the health status of
20 Illinois residents, taking into consideration national
21 health objectives and system standards as frameworks for
22 assessment.

23 The Plan shall also take into consideration priorities
24 and strategies developed at the community level through the
25 Illinois Project for Local Assessment of Needs (IPLAN) and
26 any regional health improvement plans that may be

1 developed. The Plan shall focus on prevention as a key
2 strategy for long-term health improvement in Illinois.

3 The Plan shall examine and make recommendations on the
4 contributions and strategies of the public and private
5 sectors for improving health status and the public health
6 system in the State. In addition to recommendations on
7 health status improvement priorities and strategies for
8 the population of the State as a whole, the Plan shall make
9 recommendations regarding priorities and strategies for
10 reducing and eliminating health disparities in Illinois;
11 including racial, ethnic, gender, age, socio-economic and
12 geographic disparities.

13 The Director of the Illinois Department of Public
14 Health shall appoint a Planning Team that includes a range
15 of public, private, and voluntary sector stakeholders and
16 participants in the public health system. This Team shall
17 include: the directors of State agencies with public health
18 responsibilities (or their designees), including but not
19 limited to the Illinois Departments of Public Health and
20 Department of Human Services, representatives of local
21 health departments, representatives of local community
22 health partnerships, and individuals with expertise who
23 represent an array of organizations and constituencies
24 engaged in public health improvement and prevention.

25 The State Board of Health shall hold at least 3 public
26 hearings addressing drafts of the Plan in representative

1 geographic areas of the State. Members of the Planning Team
2 shall receive no compensation for their services, but may
3 be reimbursed for their necessary expenses.

4 Upon the delivery of each State Health Improvement
5 Plan, the Governor shall appoint a SHIP Implementation
6 Coordination Council that includes a range of public,
7 private, and voluntary sector stakeholders and
8 participants in the public health system. The Council shall
9 include the directors of State agencies and entities with
10 public health system responsibilities (or their
11 designees), including but not limited to the Department of
12 Public Health, Department of Human Services, Department of
13 Healthcare and Family Services, Environmental Protection
14 Agency, Illinois State Board of Education, Department on
15 Aging, Illinois Violence Prevention Authority, Department
16 of Agriculture, Department of Insurance, Department of
17 Financial and Professional Regulation, Department of
18 Transportation, and Department of Commerce and Economic
19 Opportunity and the Chair of the State Board of Health. The
20 Council shall include representatives of local health
21 departments and individuals with expertise who represent
22 an array of organizations and constituencies engaged in
23 public health improvement and prevention, including
24 non-profit public interest groups, health issue groups,
25 faith community groups, health care providers, businesses
26 and employers, academic institutions, and community-based

1 organizations. The Governor shall endeavor to make the
2 membership of the Council representative of the racial,
3 ethnic, gender, socio-economic, and geographic diversity
4 of the State. The Governor shall designate one State agency
5 representative and one other non-governmental member as
6 co-chairs of the Council. The Governor shall designate a
7 member of the Governor's office to serve as liaison to the
8 Council and one or more State agencies to provide or
9 arrange for support to the Council. The members of the SHIP
10 Implementation Coordination Council for each State Health
11 Improvement Plan shall serve until the delivery of the
12 subsequent State Health Improvement Plan, whereupon a new
13 Council shall be appointed. Members of the SHIP Planning
14 Team may serve on the SHIP Implementation Coordination
15 Council if so appointed by the Governor.

16 The SHIP Implementation Coordination Council shall
17 coordinate the efforts and engagement of the public,
18 private, and voluntary sector stakeholders and
19 participants in the public health system to implement each
20 SHIP. The Council shall serve as a forum for collaborative
21 action; coordinate existing and new initiatives; develop
22 detailed implementation steps, with mechanisms for action;
23 implement specific projects; identify public and private
24 funding sources at the local, State and federal level;
25 promote public awareness of the SHIP; advocate for the
26 implementation of the SHIP; and develop an annual report to

1 the Governor, General Assembly, and public regarding the
2 status of implementation of the SHIP. The Council shall
3 not, however, have the authority to direct any public or
4 private entity to take specific action to implement the
5 SHIP.

6 (11) Upon the request of the Governor, to recommend to
7 the Governor candidates for Director of Public Health when
8 vacancies occur in the position.

9 (12) To adopt bylaws for the conduct of its own
10 business, including the authority to establish ad hoc
11 committees to address specific public health programs
12 requiring resolution.

13 (13) To review and comment upon the Comprehensive
14 Health Plan submitted by the Center for Comprehensive
15 Health Planning as provided under Section 2310-217 of the
16 Department of Public Health Powers and Duties Law of the
17 Civil Administrative Code of Illinois.

18 Upon appointment, the Board shall elect a chairperson from
19 among its members.

20 Members of the Board shall receive compensation for their
21 services at the rate of \$150 per day, not to exceed \$10,000 per
22 year, as designated by the Director for each day required for
23 transacting the business of the Board and shall be reimbursed
24 for necessary expenses incurred in the performance of their
25 duties. The Board shall meet from time to time at the call of
26 the Department, at the call of the chairperson, or upon the

1 request of 3 of its members, but shall not meet less than 4
2 times per year.

3 (b) (Blank).

4 (c) An Advisory Board on Necropsy Service to Coroners,
5 which shall counsel and advise with the Director on the
6 administration of the Autopsy Act. The Advisory Board shall
7 consist of 11 members, including a senior citizen age 60 or
8 over, appointed by the Governor, one of whom shall be
9 designated as chairman by a majority of the members of the
10 Board. In the appointment of the first Board the Governor shall
11 appoint 3 members to serve for terms of 1 year, 3 for terms of 2
12 years, and 3 for terms of 3 years. The members first appointed
13 under Public Act 83-1538 shall serve for a term of 3 years. All
14 members appointed thereafter shall be appointed for terms of 3
15 years, except that when an appointment is made to fill a
16 vacancy, the appointment shall be for the remaining term of the
17 position vacant. The members of the Board shall be citizens of
18 the State of Illinois. In the appointment of members of the
19 Advisory Board the Governor shall appoint 3 members who shall
20 be persons licensed to practice medicine and surgery in the
21 State of Illinois, at least 2 of whom shall have received
22 post-graduate training in the field of pathology; 3 members who
23 are duly elected coroners in this State; and 5 members who
24 shall have interest and abilities in the field of forensic
25 medicine but who shall be neither persons licensed to practice
26 any branch of medicine in this State nor coroners. In the

1 appointment of medical and coroner members of the Board, the
2 Governor shall invite nominations from recognized medical and
3 coroners organizations in this State respectively. Board
4 members, while serving on business of the Board, shall receive
5 actual necessary travel and subsistence expenses while so
6 serving away from their places of residence.

7 (Source: P.A. 96-31, eff. 6-30-09; 96-455, eff. 8-14-09;
8 revised 9-4-09.)

9 Section 99. Effective date. This Act takes effect upon
10 becoming law.