



Rep. William Davis

Filed: 3/7/2012

09700HB5193ham002

LRB097 17550 RPM 67301 a

1 AMENDMENT TO HOUSE BILL 5193

2 AMENDMENT NO. _____. Amend House Bill 5193, AS AMENDED, by
3 replacing everything after the enacting clause with the
4 following:

5 "Section 5. The Department of Public Health Powers and
6 Duties Law of the Civil Administrative Code of Illinois is
7 amended by changing Section 2310-376 as follows:

8 (20 ILCS 2310/2310-376)

9 Sec. 2310-376. Hepatitis education, ~~and~~ outreach, and
10 prevention.

11 (a) The Illinois General Assembly finds and declares the
12 following:

13 (1) An estimated 5,400,000 individuals in the United
14 States are infected with viral hepatitis B (HBV) and
15 hepatitis C (HCV), 75% of these individuals are unaware
16 they are infected.

1 (2) HBV and HCV are leading causes of liver cancer and
2 liver failure and the most common reasons for liver
3 transplantation in the United States.

4 (3) Viral hepatitis is 5 times more prevalent than
5 HIV/AIDS and has led to nearly 17,000 deaths in the United
6 States in 2007 alone; more than 1,000,000 people die each
7 year due to viral hepatitis B and C-related liver disease
8 worldwide.

9 (4) Two of every 3 people with chronic hepatitis C in
10 this country are baby boomers born between 1945 and 1965
11 who were infected decades ago.

12 (5) HCV disproportionately affects minorities. African
13 Americans, who make up 14% of the population, account for
14 22% of HCV cases in the U.S. The Hispanic community also
15 bears a heavier burden; chronic HCV is more aggressive and
16 carries a higher risk of cirrhosis for Hispanics than for
17 any other ethnic group. Immigrants from mainland China and
18 Southeast Asia also have high rates of hepatitis C.

19 (6) HBV also impacts minorities disproportionately.
20 One in 10 to 12 Asian Americans in the U.S. is chronically
21 infected with HBV. Asian Americans make up nearly 50% of
22 the 1,400,000 individuals with chronic HBV infections. In
23 addition, among all racial and ethnic groups, African
24 Americans had the highest new cases of HBV in 2009.

25 (7) The costs for viral hepatitis patients are
26 projected to more than double over the next 20 years, from

1 \$30,000,000,000 to \$85,000,000,000 per year.

2 (8) It is estimated that over 180,000 people in this
3 State are infected with hepatitis C.

4 (9) The percentage of African Americans (19.5%)
5 reported in Illinois with chronic hepatitis C was higher in
6 2004 than the percentage of African Americans (14.7%)
7 within Illinois' population.

8 (10) Almost one of every 3 persons infected with HIV in
9 this State is co-infected with hepatitis B or C.

10 (11) Forty-five percent of deaths occurring in the
11 co-infected population in Illinois are caused by liver
12 damage from chronic hepatitis B and C infections.

13 ~~(1) The World Health Organization characterizes~~
14 ~~hepatitis as a disease of primary concern to humanity.~~

15 ~~(2) Hepatitis is considered a silent killer; no~~
16 ~~recognizable signs or symptoms occur until severe liver~~
17 ~~damage has occurred.~~

18 ~~(3) Studies indicate that nearly 4 million Americans~~
19 ~~(1.8 percent of the population) carry the virus HCV that~~
20 ~~causes the disease.~~

21 ~~(4) 30,000 acute new infections occur each year in the~~
22 ~~United States, and only 25 to 30 percent are diagnosed.~~

23 ~~(5) 8,000 to 10,000 Americans die from the disease each~~
24 ~~year.~~

25 ~~(6) 200,000 Illinois residents may be carriers and~~
26 ~~could develop the debilitating and potentially deadly~~

1 ~~liver disease.~~

2 (12) ~~(7)~~ Inmates of correctional facilities have a
3 higher incidence of hepatitis and, upon their release,
4 present a significant health risk to the general
5 population.

6 (13) ~~(8)~~ Illinois members of the armed services are
7 subject to an increased risk of contracting hepatitis due
8 to their possible receipt of contaminated blood during a
9 transfusion occurring for the treatment of wounds and due
10 to their service in areas of the World where the disease is
11 more prevalent and healthcare is less capable of detecting
12 and treating the disease. Many of these service members are
13 unaware of the danger of viral hepatitis and their
14 increased risk of contracting the disease.

15 (b) Subject to appropriation, the Department shall conduct
16 an education and outreach campaign, in addition to its overall
17 effort to prevent infectious disease in Illinois, in order to
18 raise awareness about and promote prevention of viral
19 hepatitis.

20 (c) Subject to appropriation, in addition to the education
21 and outreach campaign provided in subsection (b), the
22 Department shall develop and make available to physicians,
23 other health care providers, members of the armed services, and
24 other persons subject to an increased risk of contracting
25 hepatitis, educational materials, in written and electronic
26 forms, on the diagnosis, treatment, and prevention of the

1 disease. These materials shall include the recommendations of
2 the federal Centers for Disease Control and Prevention and
3 shall reference the Centers for Disease Control and Prevention
4 guidelines regarding screening ~~any other persons or entities~~
5 ~~determined by the Department to have particular expertise on~~
6 ~~hepatitis, including the American Liver Foundation.~~ These
7 materials shall be written in terms that are understandable by
8 members of the general public.

9 (d) The Department shall establish an Advisory Council on
10 Viral Hepatitis to develop a hepatitis prevention plan. The
11 Department shall specify the membership, members' terms,
12 provisions for removal of members, chairmen, and purpose of the
13 Advisory Council. The Advisory Council shall consist of one
14 representative from each of the following State agencies or
15 offices, appointed by the head of each agency or office:

- 16 (1) The Department of Public Health.
- 17 (2) The Department of Public Aid.
- 18 (3) The Department of Corrections.
- 19 (4) The Department of Veterans' Affairs.
- 20 (5) The Department on Aging.
- 21 (6) The Department of Human Services.
- 22 (7) The Department of State Police.
- 23 (8) The office of the State Fire Marshal.

24 The Director shall appoint representatives of
25 organizations and advocates in the State of Illinois,
26 including, but not limited to, the American Liver Foundation,

1 an organization focused on health advocacy for the
2 Asian-American community, and an organization focused on
3 promoting prison reform and advocating for the incarcerated
4 population. The Director shall also appoint interested members
5 of the public, including consumers and providers of health
6 services and representatives of local public health agencies,
7 to provide recommendations and information to the members of
8 the Advisory Council. Members of the Advisory Council shall
9 serve on a voluntary, unpaid basis and are not entitled to
10 reimbursement for mileage or other costs they incur in
11 connection with performing their duties.

12 (e) By January 1, 2013, the Department, in consultation
13 with the Advisory Council, shall prepare the State Viral
14 Hepatitis Plan to guide screening and immunization, referral,
15 and treatment services to those infected with HBV and HCV. To
16 ensure meaningful input by stakeholders into the Plan, the
17 Department shall hold 2 public hearings at locations throughout
18 the State. The public hearings shall include various
19 stakeholders, including public health organizations, patient
20 advocacy organizations, organizations representing the
21 incarcerated population, as well as individuals infected with
22 HBV and HCV.

23 In developing the State Viral Hepatitis Plan, the
24 Department, in consultation with the Advisory Council, is
25 directed to assess the current and future impact of hepatitis B
26 and C on Illinois residents, including the cost of the disease

1 to public and private insurers; examine existing services and
2 access to services; and assess the resources addressing the
3 needs of persons with HBV and HCV.

4 The Plan shall include an examination of the following in
5 its assessment and recommendations:

6 (1) Trends in the State HBV and HCV population,
7 including, but not limited to, the use of State
8 surveillance data of persons with HBV and HCV for the
9 purpose of having proper estimates of the number of persons
10 in the State infected with HBV and HCV.

11 (2) The current economic impact to public and private
12 insurers of HBV and HCV and related disorders, including
13 liver disease, and those persons co-infected with
14 HIV/AIDS. This examination shall include the cost of direct
15 and indirect care paid by Medicaid and other federal-State
16 funded programs and the impact of the federal Affordable
17 Care Act on this population.

18 (3) An assessment of the existing access landscape,
19 including existing screening and immunization programs,
20 education resources, and treatment options for
21 HBV-infected and HCV-infected persons.

22 (4) The impact of HBV and HCV on the prison population
23 in this State and efforts to screen and treat HBV-infected
24 and HCV-infected inmates prior to release.

25 No later than January 1, 2016, the State Viral Hepatitis
26 Plan shall include a strategy to screen a targeted sample of

1 persons born between 1945 and 1965 for HCV, and a strategy to
2 screen a targeted sample of high risk individuals for HBV.

3 (Source: P.A. 93-129, eff. 1-1-04; 94-406, eff. 8-2-05.)

4 Section 99. Effective date. This Act takes effect upon
5 becoming law.".