



97TH GENERAL ASSEMBLY

State of Illinois

2011 and 2012

HB6246

by Rep. Mary E. Flowers

SYNOPSIS AS INTRODUCED:

See Index

Amends the Department of Public Health Powers and Duties Law and the State Finance Act. Provides that, subject to appropriation, the Department of Public Health shall administer a program for education of specified non-dental medical professionals about oral health with the goal of integrating oral health care into overall health care and may make grants to, or enter into contracts with, specified public or nonprofit medical or educational entities to educate non-oral health professionals to promote oral health education. Contains provisions concerning dental training residency programs, dental programs in schools, and emergency room care coordination. Creates the Oral Health Professional Student Loan Fund as a special fund to provide student loans to oral health professional students, including dentists and dental hygienists. Amends the Department of Veterans Affairs Act. Provides that, subject to appropriation, the Department of Veterans' Affairs may develop and implement a demonstration program to establish programs to train and employ alternative dental health care providers to increase access to dental health care services for veterans who reside in rural and other underserved communities. Amends the Illinois Public Aid Code. Removes a provision limiting adult dental services under the Medicaid program to emergency services. Provides that any person over the age of 21 who is eligible to receive medical assistance shall be eligible to receive dental services including dental services provided through a mobile dental van or portable dental unit. Contains provisions concerning funding for a case management grant program, oral health services in underserved areas, and mobile and portable dental services by rural health clinics.

LRB097 21987 KTG 70710 b

FISCAL NOTE ACT
MAY APPLY

A BILL FOR

1 AN ACT concerning public aid.

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

4 Section 1. The Department of Public Health Powers and
5 Duties Law is amended by adding Sections 2310-360a, 2310-360b,
6 2310-360c, 2310-360d, and 2310-360e as follows:

7 (20 ILCS 2310/2310-360a new)

8 Sec. 2310-360a. Oral health education programs; non-dental
9 medical professionals; non-oral health professionals.

10 (a) Subject to appropriation, the Department shall
11 administer a program for the purpose of educating non-dental
12 medical professionals, including physicians, nurses, and
13 pharmacists, about oral health, including issues such as oral
14 hygiene instruction, topical application of fluoride, and oral
15 health screenings, with the goal of integrating oral health
16 care into overall health care.

17 (b) Subject to appropriation, the Department may make
18 grants to, or enter into contracts with, an accredited public
19 or nonprofit private hospital, an educational institution, or a
20 public or private nonprofit entity which the Department has
21 determined is capable of carrying out such grant or contract to
22 educate individuals, such as community health providers,
23 social workers, nutritionists, health educators, occupational

1 therapists, and psychologists, to promote oral health
2 education and to provide support for behavior change and
3 assistance with care coordination with respect to oral health.

4 (20 ILCS 2310/2310-360b new)

5 Sec. 2310-360b. Dental training residency programs.
6 Individuals enrolled in a dental training residency program who
7 receive State funds through the Department or any other State
8 agency shall be required to provide dental services (i) in
9 hospital emergency rooms or (ii) in community settings in
10 addition to the dental training otherwise required by such
11 residency program.

12 (20 ILCS 2310/2310-360c new)

13 Sec. 2310-360c. Oral Health Professional Student Loan
14 Fund. The Oral Health Professional Student Loan Fund is created
15 as a special fund in the State treasury. Subject to
16 appropriation, monies in the Fund shall be used to provide
17 student loans to oral health professional students, including
18 dentists and dental hygienists. The Department shall adopt any
19 rules necessary to implement this Section.

20 (20 ILCS 2310/2310-360d new)

21 Sec. 2310-360d. Dental programs in schools.
22 (a) Subject to appropriation, the Department shall award
23 grants to qualified entities for the purpose of funding the

1 building, operation, or expansion of dental programs in
2 schools.

3 (b) To receive a grant under this Section, a qualified
4 entity shall submit an application to the Department at such
5 time, in such manner, and containing such information as the
6 Department may require.

7 (c) An entity receiving a grant under this Section shall:

8 (1) provide comprehensive oral health services at a
9 dental program based at a school, including oral health
10 education, oral screening, fluoride application,
11 prophylaxis, and sealants;

12 (2) refer patients to an available qualified oral
13 health provider in the community for any required oral
14 health services not provided in the dental program in the
15 school, to ensure that all the oral health needs of
16 students are met; and

17 (3) maintain dental program hours that extend beyond
18 school hours.

19 (20 ILCS 2310/2310-360e new)

20 Sec. 2310-360e. Emergency room care coordination; dental
21 services.

22 (a) Subject to appropriation, the Department shall
23 establish a grant program to enable individuals to receive
24 dental care at a facility operated by a grant recipient rather
25 than at a hospital emergency room.

1 (b) To be eligible to receive a grant under this Section,
2 an entity shall be:

3 (1) a hospital in partnership with a federally
4 qualified health center;

5 (2) a federally qualified health center;

6 (3) a private dental practice; or

7 (4) any other interested public or private sector
8 health care provider or organization that the Department
9 determines has the capacity to serve a high number of
10 individuals who lack access to oral health services.

11 (c) The Department shall allocate a portion of the amounts
12 appropriated under subsection (a) toward medical education for
13 emergency room physicians to be trained in oral health.

14 (d) Not later than January 1, 2016, the Department shall
15 submit to the General Assembly a report on the best practices
16 determined by the program established under this Section to
17 address oral health needs of individuals who go to emergency
18 rooms in need of oral health care.

19 Section 2. The Department of Veterans Affairs Act is
20 amended by adding Section 37 as follows:

21 (20 ILCS 2805/37 new)

22 Sec. 37. Alternative dental health care providers for
23 veterans; demonstration program.

24 (a) Subject to appropriation, the Department may develop

1 and implement a demonstration program to establish programs to
2 train and employ alternative dental health care providers in
3 order to increase access to dental health care services for
4 veterans entitled to such services who reside in rural and
5 other underserved communities.

6 (b) For purposes of alternative dental health care
7 providers and any other dental care providers who are licensed
8 to provide clinical care, dental services provided under the
9 demonstration program under this Section may be administered by
10 such providers through telehealth-enabled collaboration and
11 supervision when deemed appropriate and feasible.

12 (c) In this Section, "alternative dental health care
13 providers" means supervised dental hygienists, primary care
14 physicians, and any other health professional that the
15 Department determines appropriate.

16 Section 3. The State Finance Act is amended by adding
17 Section 5.811 as follows.

18 (30 ILCS 105/5.811 new)

19 Sec. 5.811. The Oral Health Professional Student Loan Fund.

20 Section 5. The Illinois Public Aid Code is amended by
21 changing Sections 5-5f and 5-19 and by adding Sections 5-31,
22 5-32, 12-4.39a, and 12-4.39b as follows:

1 (305 ILCS 5/5-5f)

2 Sec. 5-5f. Elimination and limitations of medical
3 assistance services. Notwithstanding any other provision of
4 this Code to the contrary, on and after July 1, 2012:

5 (a) The following services shall no longer be a covered
6 service available under this Code: group psychotherapy for
7 residents of any facility licensed under the Nursing Home Care
8 Act or the Specialized Mental Health Rehabilitation Act; and
9 adult chiropractic services.

10 (b) The Department shall place the following limitations on
11 services: (i) the Department shall limit adult eyeglasses to
12 one pair every 2 years; (ii) the Department shall set an annual
13 limit of a maximum of 20 visits for each of the following
14 services: adult speech, hearing, and language therapy
15 services, adult occupational therapy services, and physical
16 therapy services; (iii) the Department shall limit podiatry
17 services to individuals with diabetes; (iv) the Department
18 shall pay for caesarean sections at the normal vaginal delivery
19 rate unless a caesarean section was medically necessary; ~~(v)~~
20 ~~the Department shall limit adult dental services to~~
21 ~~emergencies;~~ and (v) ~~(vi)~~ effective July 1, 2012, the
22 Department shall place limitations and require concurrent
23 review on every inpatient detoxification stay to prevent repeat
24 admissions to any hospital for detoxification within 60 days of
25 a previous inpatient detoxification stay. The Department shall
26 convene a workgroup of hospitals, substance abuse providers,

1 care coordination entities, managed care plans, and other
2 stakeholders to develop recommendations for quality standards,
3 diversion to other settings, and admission criteria for
4 patients who need inpatient detoxification.

5 (c) The Department shall require prior approval of the
6 following services: wheelchair repairs, regardless of the cost
7 of the repairs, coronary artery bypass graft, and bariatric
8 surgery consistent with Medicare standards concerning patient
9 responsibility. The wholesale cost of power wheelchairs shall
10 be actual acquisition cost including all discounts.

11 (d) The Department shall establish benchmarks for
12 hospitals to measure and align payments to reduce potentially
13 preventable hospital readmissions, inpatient complications,
14 and unnecessary emergency room visits. In doing so, the
15 Department shall consider items, including, but not limited to,
16 historic and current acuity of care and historic and current
17 trends in readmission. The Department shall publish
18 provider-specific historical readmission data and anticipated
19 potentially preventable targets 60 days prior to the start of
20 the program. In the instance of readmissions, the Department
21 shall adopt policies and rates of reimbursement for services
22 and other payments provided under this Code to ensure that, by
23 June 30, 2013, expenditures to hospitals are reduced by, at a
24 minimum, \$40,000,000.

25 (e) The Department shall establish utilization controls
26 for the hospice program such that it shall not pay for other

1 care services when an individual is in hospice.

2 (f) For home health services, the Department shall require
3 Medicare certification of providers participating in the
4 program, implement the Medicare face-to-face encounter rule,
5 and limit services to post-hospitalization. The Department
6 shall require providers to implement auditable electronic
7 service verification based on global positioning systems or
8 other cost-effective technology.

9 (g) For the Home Services Program operated by the
10 Department of Human Services and the Community Care Program
11 operated by the Department on Aging, the Department of Human
12 Services, in cooperation with the Department on Aging, shall
13 implement an electronic service verification based on global
14 positioning systems or other cost-effective technology.

15 (h) The Department shall not pay for hospital admissions
16 when the claim indicates a hospital acquired condition that
17 would cause Medicare to reduce its payment on the claim had the
18 claim been submitted to Medicare, nor shall the Department pay
19 for hospital admissions where a Medicare identified "never
20 event" occurred.

21 (i) The Department shall implement cost savings
22 initiatives for advanced imaging services, cardiac imaging
23 services, pain management services, and back surgery. Such
24 initiatives shall be designed to achieve annual costs savings.

25 (Source: P.A. 97-689, eff. 6-14-12.)

1 (305 ILCS 5/5-19) (from Ch. 23, par. 5-19)

2 Sec. 5-19. Healthy Kids Program.

3 (a) Any child under the age of 21 eligible to receive
4 Medical Assistance from the Illinois Department under Article V
5 of this Code shall be eligible for Early and Periodic
6 Screening, Diagnosis and Treatment services provided by the
7 Healthy Kids Program of the Illinois Department under the
8 Social Security Act, 42 U.S.C. 1396d(r).

9 (b) Enrollment of Children in Medicaid. The Illinois
10 Department shall provide for receipt and initial processing of
11 applications for Medical Assistance for all pregnant women and
12 children under the age of 21 at locations in addition to those
13 used for processing applications for cash assistance,
14 including disproportionate share hospitals, federally
15 qualified health centers and other sites as selected by the
16 Illinois Department.

17 (c) Healthy Kids Examinations. The Illinois Department
18 shall consider any examination of a child eligible for the
19 Healthy Kids services provided by a medical provider meeting
20 the requirements and complying with the rules and regulations
21 of the Illinois Department to be reimbursed as a Healthy Kids
22 examination.

23 (d) Medical Screening Examinations.

24 (1) The Illinois Department shall insure Medicaid
25 coverage for periodic health, vision, hearing, and dental
26 screenings for children eligible for Healthy Kids services

1 scheduled from a child's birth up until the child turns 21
2 years. The Illinois Department shall pay for vision,
3 hearing, dental and health screening examinations for any
4 child eligible for Healthy Kids services by qualified
5 providers at intervals established by Department rules.

6 (2) The Illinois Department shall pay for an
7 interperiodic health, vision, hearing, or dental screening
8 examination for any child eligible for Healthy Kids
9 services whenever an examination is:

10 (A) requested by a child's parent, guardian, or
11 custodian, or is determined to be necessary or
12 appropriate by social services, developmental, health,
13 or educational personnel; or

14 (B) necessary for enrollment in school; or

15 (C) necessary for enrollment in a licensed day care
16 program, including Head Start; or

17 (D) necessary for placement in a licensed child
18 welfare facility, including a foster home, group home
19 or child care institution; or

20 (E) necessary for attendance at a camping program;
21 or

22 (F) necessary for participation in an organized
23 athletic program; or

24 (G) necessary for enrollment in an early childhood
25 education program recognized by the Illinois State
26 Board of Education; or

1 (H) necessary for participation in a Women,
2 Infant, and Children (WIC) program; or

3 (I) deemed appropriate by the Illinois Department.

4 (3) The dental screening services covered under this
5 subsection shall include mobile and portable oral health
6 services (as prescribed by the Illinois Department) that
7 (i) are provided for the purpose of overcoming mobility,
8 transportation, or access barriers for children and (ii)
9 satisfy the standards and certification requirements
10 established under the Illinois Dental Practice Act.

11 (e) Minimum Screening Protocols For Periodic Health
12 Screening Examinations. Health Screening Examinations must
13 include the following services:

14 (1) Comprehensive Health and Development Assessment
15 including:

16 (A) Development/Mental Health/Psychosocial
17 Assessment; and

18 (B) Assessment of nutritional status including
19 tests for iron deficiency and anemia for children at
20 the following ages: 9 months, 2 years, 8 years, and 18
21 years;

22 (2) Comprehensive unclothed physical exam;

23 (3) Appropriate immunizations at a minimum, as
24 required by the Secretary of the U.S. Department of Health
25 and Human Services under 42 U.S.C. 1396d(r).

26 (4) Appropriate laboratory tests including blood lead

1 levels appropriate for age and risk factors.

2 (A) Anemia test.

3 (B) Sickle cell test.

4 (C) Tuberculin test at 12 months of age and every
5 1-2 years thereafter unless the treating health care
6 professional determines that testing is medically
7 contraindicated.

8 (D) Other -- The Illinois Department shall insure
9 that testing for HIV, drug exposure, and sexually
10 transmitted diseases is provided for as clinically
11 indicated.

12 (5) Health Education. The Illinois Department shall
13 require providers to provide anticipatory guidance as
14 recommended by the American Academy of Pediatrics.

15 (6) Vision Screening. The Illinois Department shall
16 require providers to provide vision screenings consistent
17 with those set forth in the Department of Public Health's
18 Administrative Rules.

19 (7) Hearing Screening. The Illinois Department shall
20 require providers to provide hearing screenings consistent
21 with those set forth in the Department of Public Health's
22 Administrative Rules.

23 (8) Dental Screening. The Illinois Department shall
24 require providers to provide dental screenings consistent
25 with those set forth in the Department of Public Health's
26 Administrative Rules.

1 (f) Covered Medical Services. The Illinois Department
2 shall provide coverage for all necessary health care,
3 diagnostic services, treatment and other measures to correct or
4 ameliorate defects, physical and mental illnesses, and
5 conditions whether discovered by the screening services or not
6 for all children eligible for Medical Assistance under Article
7 V of this Code.

8 (g) Notice of Healthy Kids Services.

9 (1) The Illinois Department shall inform any child
10 eligible for Healthy Kids services and the child's family
11 about the benefits provided under the Healthy Kids Program,
12 including, but not limited to, the following: what services
13 are available under Healthy Kids, including discussion of
14 the periodicity schedules and immunization schedules, that
15 services are provided at no cost to eligible children, the
16 benefits of preventive health care, where the services are
17 available, how to obtain them, and that necessary
18 transportation and scheduling assistance is available.

19 (2) The Illinois Department shall widely disseminate
20 information regarding the availability of the Healthy Kids
21 Program throughout the State by outreach activities which
22 shall include, but not be limited to, (i) the development
23 of cooperation agreements with local school districts,
24 public health agencies, clinics, hospitals and other
25 health care providers, including developmental disability
26 and mental health providers, and with charities, to notify

1 the constituents of each of the Program and assist
2 individuals, as feasible, with applying for the Program,
3 (ii) using the media for public service announcements and
4 advertisements of the Program, and (iii) developing
5 posters advertising the Program for display in hospital and
6 clinic waiting rooms.

7 (3) The Illinois Department shall utilize accepted
8 methods for informing persons who are illiterate, blind,
9 deaf, or cannot understand the English language, including
10 but not limited to public services announcements and
11 advertisements in the foreign language media of radio,
12 television and newspapers.

13 (4) The Illinois Department shall provide notice of the
14 Healthy Kids Program to every child eligible for Healthy
15 Kids services and his or her family at the following times:

16 (A) orally by the intake worker and in writing at
17 the time of application for Medical Assistance;

18 (B) at the time the applicant is informed that he
19 or she is eligible for Medical Assistance benefits; and

20 (C) at least 20 days before the date of any
21 periodic health, vision, hearing, and dental
22 examination for any child eligible for Healthy Kids
23 services. Notice given under this subparagraph (C)
24 must state that a screening examination is due under
25 the periodicity schedules and must advise the eligible
26 child and his or her family that the Illinois

1 Department will provide assistance in scheduling an
2 appointment and arranging medical transportation.

3 (h) Data Collection. The Illinois Department shall collect
4 data in a usable form to track utilization of Healthy Kids
5 screening examinations by children eligible for Healthy Kids
6 services, including but not limited to data showing screening
7 examinations and immunizations received, a summary of
8 follow-up treatment received by children eligible for Healthy
9 Kids services and the number of children receiving dental,
10 hearing and vision services.

11 (i) On and after July 1, 2012, the Department shall reduce
12 any rate of reimbursement for services or other payments or
13 alter any methodologies authorized by this Code to reduce any
14 rate of reimbursement for services or other payments in
15 accordance with Section 5-5e.

16 (Source: P.A. 97-689, eff. 6-14-12.)

17 (305 ILCS 5/5-31 new)

18 Sec. 5-31. Adult dental services. Notwithstanding any
19 other provision of this Code, any person over the age of 21 who
20 is eligible to receive medical assistance under this Article
21 shall be eligible to receive dental services.

22 For purposes of this Section, "dental services" means oral
23 health services (as prescribed by the Department) provided by a
24 licensed oral health care provider that are necessary to
25 prevent disease and promote oral health, restore oral

1 structures to health and function, and treat emergency
2 conditions. "Dental services" includes those services provided
3 through a mobile dental van or portable dental unit as defined
4 in Section 4 of the Illinois Dental Practice Act that (i) are
5 provided for the purpose of overcoming mobility,
6 transportation, and access barriers for individuals; and (ii)
7 satisfy standards and certification requirements established
8 under the Illinois Dental Practice Act.

9 The Department shall provide notice of the dental services
10 provided under this Section in writing to any person over the
11 age of 21 who is eligible to receive medical assistance under
12 this Article.

13 (305 ILCS 5/5-32 new)

14 Sec. 5-32. Case management grant program.

15 (a) Definitions.

16 (1) "Eligible entity" means an organization that is
17 described in Section 501(c) (3) of the Internal Revenue Code
18 of 1986 and exempt from tax under Section 501(a) of that
19 Code.

20 (2) "Eligible individual" means an individual who:

21 (A) is eligible to receive medical assistance
22 under the State's approved plan under Title XIX of the
23 Social Security Act or under any waiver approved by the
24 federal Centers for Medicare and Medicaid Services
25 with respect to such plan;

1 (B) is eligible to receive health care benefits
2 under the Covering ALL KIDS Health Insurance Act or the
3 Children's Health Insurance Program Act pursuant to
4 Title XXI of the Social Security Act or under any
5 waiver approved by the federal Centers for Medicare and
6 Medicaid Services with respect to the health care
7 benefits provided under the Children's Health
8 Insurance Program Act;

9 (C) is entitled to receive health care benefits
10 under the Veterans' Health Insurance Program Act of
11 2008; or

12 (D) has an income below 200% of the federal poverty
13 level and does not otherwise have insurance coverage.

14 (b) Grants. Subject to appropriation, the Department shall
15 award grants to eligible entities for the purpose of developing
16 case management programs that:

17 (1) identify eligible individuals who are in need of
18 dental services, with a particular focus on pregnant women,
19 individuals with disabilities, and older adults, and
20 provide them with information regarding dental providers
21 in proximity to their residence;

22 (2) determine the coverage status of an eligible
23 individual or whether such individual is eligible for free
24 dental services;

25 (3) recruit licensed dental providers and coordinate
26 the voluntary provision of medically recommended dental

1 services by such providers to eligible individuals
2 described in subparagraph (D) of paragraph (2) of
3 subsection (a) with no fee or charge to such individuals
4 and in a manner consistent with State licensing laws;

5 (4) provide community-level oral health education,
6 with a focus on oral health literacy and prevention, and
7 resource information to eligible individuals; and

8 (5) identify and coordinate transportation for
9 eligible individuals in need of dental services as
10 necessary to overcome mobility impairments and
11 transportation barriers.

12 (c) Application. An eligible entity that desires to
13 participate in the grant program under this Section shall
14 submit to the Department an application at such time, in such
15 manner, and containing such information as the Department may
16 require.

17 (d) Duration and scope. From any amounts appropriated to
18 carry out this Section, the Department shall award grants to a
19 total of 10 eligible entities, with the amount of each grant to
20 be determined at the discretion of the Department.

21 (e) Evaluation. Not later than January 1, 2016, the
22 Department shall conduct an evaluation of the grant program
23 under this Section for purposes of determining if case
24 management programs established by participating eligible
25 entities sufficiently increased access to dental services.

1 (305 ILCS 5/12-4.39a new)

2 Sec. 12-4.39a. Funding for oral health services in
3 underserved areas.

4 (a) Subject to appropriation, the Department shall
5 establish a program to award grants to eligible entities to
6 provide oral health services, or to contract with private
7 dental practices to provide comprehensive oral health
8 services, to low-income individuals and individuals who are
9 underserved with respect to oral health care.

10 (b) The Department shall provide technical assistance to
11 entities receiving grants under subsection (a) to provide
12 technical assistance to such entities in order to:

13 (1) with respect to oral health care services, increase
14 efficiency and minimize missed appointments, contract with
15 offsite providers, recruit providers (including oral
16 health specialists), and operate programs outside the
17 physical facilities to take advantage of new systems to
18 improve access to oral health services; or

19 (2) contract with private dental practices that will
20 provide oral health services other than preventive oral
21 health care, including restoration and maintenance of oral
22 health, in order to meet the need for oral health services
23 in the community.

24 (c) To be eligible to receive a grant under subsection (a),
25 an entity:

1 (1) shall be:

2 (A) a federally qualified health center (as
3 defined in Section 1861(aa) of the Social Security
4 Act);

5 (B) a safety net clinic or a free clinic (as
6 defined by the Department); or

7 (C) any other interested public or private sector
8 health care provider or organization that the
9 Department determines has a demonstrated history in
10 servicing a high number of uninsured or low-income
11 individuals or those who lack ready access to oral
12 health services; and

13 (2) shall demonstrate a clear need to expand oral
14 health care services beyond preventive oral health care.

15 (d) A portion of the funds available under this Section
16 shall be allocated toward hiring oral health care specialists,
17 such as oral surgeons, at entities receiving grants under this
18 Section.

19 (305 ILCS 5/12-4.39b new)

20 Sec. 12-4.39b. Mobile and portable dental services; rural
21 health clinics. Subject to appropriation, the Department shall
22 award grants to rural health clinics as defined in Section
23 1861(aa)(2) of the Social Security Act (42 U.S.C. 1395x(aa)(2))
24 to provide mobile and portable, comprehensive dental services
25 (including dental services provided by licensed providers

1 through telehealth-enabled collaboration and supervision) and
2 outreach for dental services at locations such as senior
3 centers; nursing homes; assisted living facilities; schools;
4 licensed day care centers that serve children who receive
5 benefits under the Children's Health Insurance Program under
6 the Children's Health Insurance Program Act or the Medicaid
7 program under Article V of this Code; and facilities that
8 provide services under the Special Supplemental Nutrition
9 Program for Women, Infants, and Children (WIC) or the Head
10 Start Act (42 U.S.C. 9831).

1 INDEX

2 Statutes amended in order of appearance

3 20 ILCS 2310/2310-360a new

4 20 ILCS 2310/2310-360b new

5 20 ILCS 2310/2310-360c new

6 20 ILCS 2310/2310-360d new

7 20 ILCS 2310/2310-360e new

8 20 ILCS 2805/37 new

9 30 ILCS 105/5.811 new

10 305 ILCS 5/5-5f

11 305 ILCS 5/5-19 from Ch. 23, par. 5-19

12 305 ILCS 5/5-31 new

13 305 ILCS 5/5-32 new

14 305 ILCS 5/12-4.39a new

15 305 ILCS 5/12-4.39b new