

## 99TH GENERAL ASSEMBLY State of Illinois 2015 and 2016 SB3062

Introduced 2/19/2016, by Sen. Heather A. Steans

## SYNOPSIS AS INTRODUCED:

See Index

Amends the Family Practice Residency Act. Changes the short title to the Family Practice and Behavioral Health Promotion Act (and amends the Department of Public Health Powers and Duties Law of the Civil Administrative Code of Illinois, the Nurses in Advancement Law, the Private Medical Scholarship Agreement Act, and the Illinois Public Aid Code to reflect that change). Makes changes to the definition of "Designated Shortage Area". Provides that the Department of Public Health shall have the power and duty to allocate funds to behavioral health care programs, to include in its scholarship program the award of behavioral health care professional scholarships, and to include eligible behavioral health care professionals in its educational loan repayment program. representatives of behavioral health care programs to the advisory committee. Provides that funding for family practice residency programs may not be diverted or diminished below fiscal year 2015 funding levels to fund behavioral health care programs. Makes related changes. Effective immediately.

LRB099 19588 NHT 43983 b

FISCAL NOTE ACT
MAY APPLY

2.3

1 AN ACT concerning education.

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

Section 5. The Department of Public Health Powers and
Duties Law of the Civil Administrative Code of Illinois is
amended by changing Section 2310-220 as follows:

(20 ILCS 2310/2310-220) (was 20 ILCS 2310/55.73)

Sec. 2310-220. Findings; rural obstetrical care. The General Assembly finds that substantial areas of rural Illinois lack adequate access to obstetrical care. The primary cause of this problem is the absence of qualified practitioners who are willing to offer obstetrical services. A significant barrier to recruiting and retaining those practitioners is the high cost of professional liability insurance for practitioners offering obstetrical care.

Therefore, the Department, from funds appropriated for that purpose, shall award grants to physicians practicing obstetrics in rural designated shortage areas, as defined in Section 3.04 of the Family Practice and Behavioral Health Promotion Residency Act, for the purpose of reimbursing those physicians for the costs of obtaining malpractice insurance relating to obstetrical services. The Department shall establish reasonable conditions, standards, and duties

- 1 relating to the application for and receipt of the grants.
- 2 (Source: P.A. 91-239, eff. 1-1-00.)
- 3 Section 10. The Family Practice Residency Act is amended by
- 4 changing Sections 1, 2, 3.03, 3.04, 4.01, 4.02, 4.03, 4.10, 5,
- 5 6, and 9 and by adding Sections 3.10, 3.11, and 10.5 as
- 6 follows:
- 7 (110 ILCS 935/1) (from Ch. 144, par. 1451)
- 8 Sec. 1. This Act shall be known and may be cited as the
- 9 "Family Practice and Behavioral Health Promotion Residency
- 10 Act<u>"</u>.
- 11 (Source: P.A. 80-478.)
- 12 (110 ILCS 935/2) (from Ch. 144, par. 1452)
- Sec. 2. The purpose of this Act is to establish programs in
- the Illinois Department of Public Health to upgrade primary and
- 15 behavioral health care services for all citizens of the State,
- 16 to increase access, and to reduce health care disparities by
- 17 providing grants to family practice residency, and preventive
- 18 medicine residency, and behavioral health care residency
- 19 programs, scholarships to medical students and other eligible
- 20 behavioral health care professionals, and a loan repayment
- 21 program for physicians, and other eligible primary care
- 22 providers, and eligible behavioral health care professionals
- 23 who will agree to practice in areas of the State demonstrating

- 1 the greatest need for more professional medical <u>and behavioral</u>
- 2 health care. The programs shall encourage family practice
- 3 physicians, and other eligible primary care providers, and
- 4 eligible behavioral health care professionals to locate in
- 5 areas where primary care and behavioral health manpower
- 6 shortages exist and to increase the total number of family
- 7 practice physicians, and other eligible primary care
- 8 providers, and eligible behavioral health care professionals
- 9 in the State.
- 10 (Source: P.A. 98-674, eff. 6-30-14.)
- 11 (110 ILCS 935/3.03) (from Ch. 144, par. 1453.03)
- 12 Sec. 3.03. "Committee" means the Advisory Committee for
- 13 Family Practice Residency Programs and Behavioral Health Care
- 14 Programs created by this Act.
- 15 (Source: P.A. 80-478.)
- 16 (110 ILCS 935/3.04) (from Ch. 144, par. 1453.04)
- 17 Sec. 3.04. "Designated Shortage Area" means an area
- 18 designated by the Director as a physician shortage area, a
- 19 medically underserved area, or a critical health manpower
- 20 shortage area, a health professional shortage area, or a mental
- 21 health professional shortage area, as defined by the United
- 22 States Department of Health and Human Services, Education and
- 23 Welfare, or as otherwise further defined by the Department to
- 24 enable it to effectively fulfill the purpose stated in Section

1	2	of	this	Act.	Such	areas	may	include	the	following:
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- 2 (a) an urban or rural area which is a rational area for the
- 3 delivery of health services;
- 4 (b) a population group; or
- 5 (c) a public or nonprofit private medical facility.
- 6 (Source: P.A. 80-478.)
- 7 (110 ILCS 935/3.10 new)
- 8 Sec. 3.10. Eligible behavioral health care professionals.
- 9 "Eligible behavioral health care professionals" include the
- 10 following licensed professionals who have behavioral health
- 11 care training and experience:
- 12 (1) psychiatrists licensed to practice medicine in all
- of its branches under the Medical Practice Act of 1987;
- 14 (2) clinical psychologists licensed under the Clinical
- 15 Psychologist Licensing Act;
- 16 <u>(3) clinical social workers licensed under the</u>
- 17 Clinical Social Work and Social Work Practice Act;
- 18 <u>(4) psychiatric nurse specialists licensed as</u>
- registered nurses under the Nurse Practice Act; and
- 20 (5) marriage and family therapists licensed under the
- 21 Marriage and Family Therapy Licensing Act.
- 22 (110 ILCS 935/3.11 new)
- Sec. 3.11. Behavioral health care program. "Behavioral
- 24 health care program" means a behavioral health care service of

- 1 <u>a hospital or hospital affiliate as defined under the Hospital</u>
- 2 Licensing Act.
- 3 (110 ILCS 935/4.01) (from Ch. 144, par. 1454.01)
- 4 Sec. 4.01. To allocate funds to family practice residency
- 5 programs and behavioral health care programs according to the
- 6 following priorities:
- 7 (a) to increase the number of family practice physicians
- 8 and behavioral health care professionals in Designated
- 9 Shortage Areas;
- 10 (b) to increase the percentage of obstetricians
- 11 establishing practice within the State upon completion of
- 12 residency;
- 13 (c) to increase the number of accredited family practice
- 14 residencies within the State;
- 15 (d) to increase the percentage of family practice
- 16 physicians establishing practice within the State upon
- 17 completion of residency; and
- 18 (d-5) to increase access to behavioral health care in
- 19 Designated Shortage Areas;
- 20 (d-10) to increase the number of eligible behavioral health
- 21 care professionals providing health care services in this
- 22 State; and
- 23 (e) to provide funds for rental of office space, purchase
- 24 of equipment and other uses necessary to enable family
- 25 practitioners and eligible behavioral health care

- professionals to locate their practices in communities located 1
- 2 in designated shortage areas.
- (Source: P.A. 86-1384.) 3
- 4 (110 ILCS 935/4.02) (from Ch. 144, par. 1454.02)
- 5 Sec. 4.02. To determine the procedures for the distribution
- 6 funds to family practice residency programs and
- 7 behavioral health care programs, including the establishment
- 8 of eligibility criteria in accordance with the following
- 9 quidelines:
- (a) preference for programs which are to be established at 10
- 11 locations which exhibit potential for extending family
- 12 practice physician and behavioral health care availability to
- 1.3 Designated Shortage Areas;
- (b) preference for programs which are located away from 14
- 15 communities in which medical schools are located; and
- 16 (c) preference for programs located in hospitals having
- affiliation agreements with medical schools located within the 17
- 18 State.
- 19 In distributing such funds, the Department may also
- 20 consider as secondary criteria whether a family practice
- 21 residency program has:
- 22 (1) Adequate courses of instruction in the behavioral
- 23 sciences:
- 24 (2) Availability and systematic utilization
- 25 opportunities for residents to gain experience through local

- 1 health departments or other preventive or occupational medical
- 2 facilities;
- 3 (3) A continuing program of community-oriented research in
- 4 such areas as risk factors in community populations,
- 5 immunization levels, environmental hazards, or occupational
- 6 hazards;
- 7 (4) Sufficient mechanisms for maintenance of quality
- 8 training, such as peer review, systematic progress reviews,
- 9 referral system, and maintenance of adequate records; and
- 10 (5) An appropriate course of instruction in societal,
- 11 institutional and economic conditions affecting family
- 12 practice.
- 13 (Source: P.A. 81-321.)
- 14 (110 ILCS 935/4.03) (from Ch. 144, par. 1454.03)
- 15 Sec. 4.03. To establish a program of medical student and
- behavioral health care professional scholarships and to award
- 17 scholarships to eligible medical students and eligible
- behavioral health care professionals.
- 19 (Source: P.A. 80-478.)
- 20 (110 ILCS 935/4.10) (from Ch. 144, par. 1454.10)
- Sec. 4.10. To establish programs, and the criteria for such
- 22 programs, for the repayment of the educational loans of primary
- care physicians, and other eligible primary care providers, and
- 24 eligible behavioral health care professionals who agree to

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serve in Designated Shortage Areas for a specified period of 1 2 time, no less than 2 years. Payments under this program may be made for the principal, interest and related expenses of 3 government and commercial loans received by the individual for 4 expenses, and all other reasonable educational 5 6 expenses incurred by the individual. Payments made under this provision shall be exempt from Illinois State Income Tax. The 7 8 Department may use tobacco settlement recovery funding or other 9 available funding to implement this Section.

10 (Source: P.A. 98-674, eff. 6-30-14.)

11 (110 ILCS 935/5) (from Ch. 144, par. 1455)

The Advisory Committee for Family Practice 5. Residency Programs and Behavioral Health Care Programs is shall consult created and with the Director the administration of this Act. The Committee shall consist of 13  $\frac{9}{2}$ members appointed by the Director, 4 of whom shall be family practice physicians, 4 of whom shall be representatives of behavioral health care programs, one of whom shall be the dean or associate or deputy dean of a medical school in this State, and 4 of whom shall be representatives of the general public. Terms of membership shall be 4 years. Initial appointments by Director shall be staggered, with 4 appointments terminating January 31, 1979 and 4 terminating January 31, 1981. Of the 4 additional members appointed under this amendatory Act of the 99th General Assembly, 2 members, as

1 determined by the Director, shall serve for a term that 2 commences on the date of their appointment and expires on 3 January 31, 2019 and the other 2 members shall serve for a term that commences on the date of their appointment and expires on 4 5 January 31, 2021. Each member shall continue to serve after the expiration of his term until his successor has been appointed. 6 7 No person shall serve more than 2 terms. Vacancies shall be 8 filled by appointment for the unexpired term of any member in 9 the same manner as the vacant position had been filled. The 10 Committee shall select from its members a chairman from among 11 the family practice physician members, and such other officers 12 as may be required. The Committee shall meet as frequently as the Director deems necessary, but not less than once each year. 13 The Committee members shall receive no compensation but shall 14 15 be reimbursed for actual expenses incurred in carrying out 16 their duties.

17 (Source: P.A. 92-635, eff. 7-11-02.)

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18 (110 ILCS 935/6) (from Ch. 144, par. 1456)

Sec. 6. Family practice residency programs and behavioral health care programs seeking funds under this Act shall make application to the Department. The application shall include evidence of local support for the program, either in the form of funds, services or other resources. The ratio of State support to local support shall be determined by the Department in a manner that is consistent with the purpose of this Act as

- 1 stated in Section 2 of this Act. In establishing such ratio of
- 2 State to local support the Department may vary the amount of
- 3 the required local support depending upon the criticality of
- 4 the need for more professional health care services, the
- 5 geographic location and the economic base of the Designated
- 6 Shortage Area.
- 7 (Source: P.A. 80-478.)
- 8 (110 ILCS 935/9) (from Ch. 144, par. 1459)
- 9 Sec. 9. The Department shall annually report to the General 10 Assembly and the Governor the results and progress of the
- programs established by this Act on or before March 15th.
- The annual report to the General Assembly and the Governor
- 13 shall include the impact of programs established under this Act
- on the ability of designated shortage areas to attract and
- 15 retain physicians and other health care personnel and the
- 16 ability of designated behavioral health care programs to
- 17 attract and retain eligible behavioral health care
- 18 professionals in Designated Shortage Areas. The report shall
- include recommendations to improve that ability.
- The requirement for reporting to the General Assembly shall
- 21 be satisfied by filing copies of the report with the Speaker,
- 22 the Minority Leader and the Clerk of the House of
- 23 Representatives and the President, the Minority Leader and the
- 24 Secretary of the Senate and the Legislative Research Unit, as
- 25 required by Section 3.1 of the General Assembly Organization

- 1 Act, and filing such additional copies with the State
- 2 Government Report Distribution Center for the General Assembly
- 3 as is required under paragraph (t) of Section 7 of the State
- 4 Library Act.
- 5 (Source: P.A. 86-965; 87-430; 87-633; 87-895.)
- 6 (110 ILCS 935/10.5 new)
- Sec. 10.5. Funding. Funding for family practice residency
- 8 programs may not be diverted or diminished below fiscal year
- 9 2015 funding levels to fund behavioral health care programs.
- 10 Section 15. The Nurses in Advancement Law is amended by
- 11 changing Section 1-20 as follows:
- 12 (110 ILCS 970/1-20) (from Ch. 144, par. 2781-20)
- 13 Sec. 1-20. Scholarship requirements. It shall be lawful for
- 14 any organization to condition any loan or grant upon the
- recipient's executing an agreement to commit not more than 5
- 16 years of his or her professional career to the goals
- 17 specifically outlined within the agreement including a
- 18 requirement that recipient practice nursing or medicine in
- 19 specifically designated practice and geographic areas.
- 20 Any agreement executed by an organization and any recipient
- 21 of loan or grant assistance shall contain a provision for
- liquidated damages to be paid for any breach of any provision
- of the agreement, or any commitment contained therein, together

- with attorney's fees and costs for the enforcement thereof. Any
- 2 such covenant shall be valid and enforceable in the courts of
- 3 this State as liquidated damages and shall not be considered a
- 4 penalty, provided that the provision for liquidated damages
- 5 does not exceed \$2,500 for each year remaining for the
- 6 performance of the agreement.
- 7 This Section shall not be construed as pertaining to or
- 8 limiting any liquidated damages resulting from scholarships
- 9 awarded under the Family Practice and Behavioral Health
- 10 <u>Promotion</u> Residency Act.
- 11 (Source: P.A. 92-651, eff. 7-11-02.)
- 12 Section 20. The Private Medical Scholarship Agreement Act
- is amended by changing Section 3 as follows:
- 14 (110 ILCS 980/3) (from Ch. 144, par. 2703)
- 15 Sec. 3. Any such agreement executed by such an organization
- and any recipient of loan, grant assistance or recommendation
- 17 may contain a provision for liquidated damages to be paid for
- any breach of any provision of the agreement, or any commitment
- 19 contained therein, together with attorney's fees and costs for
- 20 the enforcement thereof. Any such covenant shall be valid and
- 21 enforceable in the courts of this State as liquidated damages
- 22 and shall not be considered a penalty, provided that such
- provision for liquidated damages does not exceed \$2,500 for
- each year remaining for the performance of such agreement.

- 1 This Section shall not be construed as pertaining to or
- 2 limiting any liquidated damages resulting from scholarships
- 3 awarded under the "Family Practice and Behavioral Health
- 4 Promotion Residency Act", as amended.
- 5 (Source: P.A. 86-999.)
- 6 Section 25. The Illinois Public Aid Code is amended by
- 7 changing Section 12-4.24a as follows:
- 8 (305 ILCS 5/12-4.24a) (from Ch. 23, par. 12-4.24a)
- 9 Sec. 12-4.24a. Report and recommendations concerning
- 10 designated shortage area. The Illinois Department shall
- 11 analyze payments made to providers of medical services under
- 12 Article V of this Code to determine whether any special
- 13 compensatory standard should be applied to payments to such
- 14 providers in designated shortage areas as defined in Section
- 3.04 of the Family Practice and Behavioral Health Promotion
- 16 Residency Act, as now or hereafter amended. The Illinois
- 17 Department shall, not later than June 30, 1990, report to the
- 18 Governor and the General Assembly concerning the results of its
- 19 analysis, and may provide by rule for adjustments in its
- 20 payment rates to medical service providers in such areas.
- 21 (Source: P.A. 92-111, eff. 1-1-02.)
- 22 Section 99. Effective date. This Act takes effect upon
- 23 becoming law.

1	INDEX							
2	Statutes amended in order of appearance							
3	20 ILCS 2310/2310-220	was 20 ILCS 2310/55.73						
4	110 ILCS 935/1	from Ch. 144, par. 1451						
5	110 ILCS 935/2	from Ch. 144, par. 1452						
6	110 ILCS 935/3.03	from Ch. 144, par. 1453.03						
7	110 ILCS 935/3.04	from Ch. 144, par. 1453.04						
8	110 ILCS 935/3.10 new							
9	110 ILCS 935/3.11 new							
10	110 ILCS 935/4.01	from Ch. 144, par. 1454.01						
11	110 ILCS 935/4.02	from Ch. 144, par. 1454.02						
12	110 ILCS 935/4.03	from Ch. 144, par. 1454.03						
13	110 ILCS 935/4.10	from Ch. 144, par. 1454.10						
14	110 ILCS 935/5	from Ch. 144, par. 1455						
15	110 ILCS 935/6	from Ch. 144, par. 1456						
16	110 ILCS 935/9	from Ch. 144, par. 1459						
17	110 ILCS 935/10.5 new							
18	110 ILCS 970/1-20	from Ch. 144, par. 2781-20						
19	110 ILCS 980/3	from Ch. 144, par. 2703						
20	305 ILCS 5/12-4.24a	from Ch. 23, par. 12-4.24a						