

1 AN ACT concerning education.

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

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

7 (20 ILCS 2310/2310-220) (was 20 ILCS 2310/55.73)

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

16 Therefore, the Department, from funds appropriated for  
17 that purpose, shall award grants to physicians practicing  
18 obstetrics in rural designated shortage areas, as defined in  
19 Section 3.04 of the Family Practice and Behavioral Health  
20 Promotion Residency Act, for the purpose of reimbursing those  
21 physicians for the costs of obtaining malpractice insurance  
22 relating to obstetrical services. The Department shall  
23 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".

11 (Source: P.A. 80-478.)

12 (110 ILCS 935/2) (from Ch. 144, par. 1452)

13 Sec. 2. The purpose of this Act is to establish programs in  
14 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 and behavioral  
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:

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  
13 of its branches under the Medical Practice Act of 1987;

14 (2) clinical psychologists licensed under the Clinical  
15 Psychologist Licensing Act;

16 (3) clinical social workers licensed under the  
17 Clinical Social Work and Social Work Practice Act;

18 (4) psychiatric nurse specialists licensed as  
19 registered nurses under the Nurse Practice Act;

20 (5) marriage and family therapists licensed under the  
21 Marriage and Family Therapy Licensing Act; and

22 (6) clinical professional counselors licensed under  
23 the Professional Counselor and Clinical Professional  
24 Counselor Licensing and Practice Act.

1 (110 ILCS 935/3.11 new)

2 Sec. 3.11. Behavioral health care program. "Behavioral  
3 health care program" means a behavioral health care service of  
4 a hospital or hospital affiliate, as defined under the Hospital  
5 Licensing Act; a hospital operated under the University of  
6 Illinois Hospital Act; a federally qualified health center, as  
7 defined in Section 1905(1) (2) (B) of the federal Social Security  
8 Act; or a community mental health center that has satisfied the  
9 Medicare conditions of participation for community mental  
10 health centers under 42 CFR 485.904 through 42 CFR 485.918.

11 (110 ILCS 935/4.01) (from Ch. 144, par. 1454.01)

12 Sec. 4.01. To allocate funds to family practice residency  
13 programs and behavioral health care programs according to the  
14 following priorities:

15 (a) to increase the number of family practice physicians  
16 and behavioral health care professionals in Designated  
17 Shortage Areas;

18 (b) to increase the percentage of obstetricians  
19 establishing practice within the State upon completion of  
20 residency;

21 (c) to increase the number of accredited family practice  
22 residencies within the State;

23 (d) to increase the percentage of family practice  
24 physicians establishing practice within the State upon  
25 completion of residency; ~~and~~

1       (d-5) to increase access to behavioral health care in  
2 Designated Shortage Areas;

3       (d-10) to increase the number of eligible behavioral health  
4 care professionals providing health care services in this  
5 State; and

6       (e) to provide funds for rental of office space, purchase  
7 of equipment and other uses necessary to enable family  
8 practitioners and eligible behavioral health care  
9 professionals to locate their practices in communities located  
10 in designated shortage areas.

11       (Source: P.A. 86-1384.)

12       (110 ILCS 935/4.02) (from Ch. 144, par. 1454.02)

13       Sec. 4.02. To determine the procedures for the distribution  
14 of the funds to family practice residency programs and  
15 behavioral health care programs, including the establishment  
16 of eligibility criteria in accordance with the following  
17 guidelines:

18       (a) preference for programs which are to be established at  
19 locations which exhibit potential for extending family  
20 practice physician and behavioral health care availability to  
21 Designated Shortage Areas;

22       (b) preference for programs which are located away from  
23 communities in which medical schools are located; and

24       (c) preference for programs located in hospitals having  
25 affiliation agreements with medical schools located within the

1 State.

2 In distributing such funds, the Department may also  
3 consider as secondary criteria whether a family practice  
4 residency program has:

5 (1) Adequate courses of instruction in the behavioral  
6 sciences;

7 (2) Availability and systematic utilization of  
8 opportunities for residents to gain experience through local  
9 health departments or other preventive or occupational medical  
10 facilities;

11 (3) A continuing program of community-oriented research in  
12 such areas as risk factors in community populations,  
13 immunization levels, environmental hazards, or occupational  
14 hazards;

15 (4) Sufficient mechanisms for maintenance of quality  
16 training, such as peer review, systematic progress reviews,  
17 referral system, and maintenance of adequate records; and

18 (5) An appropriate course of instruction in societal,  
19 institutional and economic conditions affecting family  
20 practice.

21 (Source: P.A. 81-321.)

22 (110 ILCS 935/4.03) (from Ch. 144, par. 1454.03)

23 Sec. 4.03. To establish a program of medical student and  
24 behavioral health care professional scholarships and to award  
25 scholarships to eligible medical students and eligible

1 behavioral health care professionals.

2 (Source: P.A. 80-478.)

3 (110 ILCS 935/4.10) (from Ch. 144, par. 1454.10)

4 Sec. 4.10. To establish programs, and the criteria for such  
5 programs, for the repayment of the educational loans of primary  
6 care physicians, ~~and~~ other eligible primary care providers, and  
7 eligible behavioral health care professionals who agree to  
8 serve in Designated Shortage Areas for a specified period of  
9 time, no less than 2 years. Payments under this program may be  
10 made for the principal, interest and related expenses of  
11 government and commercial loans received by the individual for  
12 tuition expenses, and all other reasonable educational  
13 expenses incurred by the individual. Payments made under this  
14 provision shall be exempt from Illinois State Income Tax. The  
15 Department may use tobacco settlement recovery funding or other  
16 available funding to implement this Section.

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

18 (110 ILCS 935/5) (from Ch. 144, par. 1455)

19 Sec. 5. The Advisory Committee for Family Practice  
20 Residency Programs and Behavioral Health Care Programs is  
21 created and shall consult with the Director in the  
22 administration of this Act. The Committee shall consist of 13 ~~9~~  
23 members appointed by the Director, 4 of whom shall be family  
24 practice physicians, 4 of whom shall be representatives of



1 behavioral health care programs, one of whom shall be the dean  
2 or associate or deputy dean of a medical school in this State,  
3 and 4 of whom shall be representatives of the general public.  
4 Terms of membership shall be 4 years. Initial appointments by  
5 the Director shall be staggered, with 4 appointments  
6 terminating January 31, 1979 and 4 terminating January 31,  
7 1981. Of the 4 additional members appointed under this  
8 amendatory Act of the 99th General Assembly, 2 members, as  
9 determined by the Director, shall serve for a term that  
10 commences on the date of their appointment and expires on  
11 January 31, 2019 and the other 2 members shall serve for a term  
12 that commences on the date of their appointment and expires on  
13 January 31, 2021. Each member shall continue to serve after the  
14 expiration of his term until his successor has been appointed.  
15 No person shall serve more than 2 terms. Vacancies shall be  
16 filled by appointment for the unexpired term of any member in  
17 the same manner as the vacant position had been filled. The  
18 Committee shall select from its members a chairman from among  
19 the family practice physician members, and such other officers  
20 as may be required. The Committee shall meet as frequently as  
21 the Director deems necessary, but not less than once each year.  
22 The Committee members shall receive no compensation but shall  
23 be reimbursed for actual expenses incurred in carrying out  
24 their duties.

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

1 (110 ILCS 935/6) (from Ch. 144, par. 1456)

2 Sec. 6. Family practice residency programs and behavioral  
3 health care programs seeking funds under this Act shall make  
4 application to the Department. The application shall include  
5 evidence of local support for the program, either in the form  
6 of funds, services or other resources. The ratio of State  
7 support to local support shall be determined by the Department  
8 in a manner that is consistent with the purpose of this Act as  
9 stated in Section 2 of this Act. In establishing such ratio of  
10 State to local support the Department may vary the amount of  
11 the required local support depending upon the criticality of  
12 the need for more professional health care services, the  
13 geographic location and the economic base of the Designated  
14 Shortage Area.

15 (Source: P.A. 80-478.)

16 (110 ILCS 935/9) (from Ch. 144, par. 1459)

17 Sec. 9. The Department shall annually report to the General  
18 Assembly and the Governor the results and progress of the  
19 programs established by this Act on or before March 15th.

20 The annual report to the General Assembly and the Governor  
21 shall include the impact of programs established under this Act  
22 on the ability of designated shortage areas to attract and  
23 retain physicians and other health care personnel and the  
24 ability of designated behavioral health care programs to  
25 attract and retain eligible behavioral health care

1 professionals in Designated Shortage Areas. The report shall  
2 include recommendations to improve that ability.

3 The requirement for reporting to the General Assembly shall  
4 be satisfied by filing copies of the report with the Speaker,  
5 the Minority Leader and the Clerk of the House of  
6 Representatives and the President, the Minority Leader and the  
7 Secretary of the Senate and the Legislative Research Unit, as  
8 required by Section 3.1 of the General Assembly Organization  
9 Act, and filing such additional copies with the State  
10 Government Report Distribution Center for the General Assembly  
11 as is required under paragraph (t) of Section 7 of the State  
12 Library Act.

13 (Source: P.A. 86-965; 87-430; 87-633; 87-895.)

14 (110 ILCS 935/10.5 new)

15 Sec. 10.5. Funding. Funding for family practice residency  
16 programs shall not be diverted or diminished below fiscal year  
17 2015 funding levels to fund behavioral health care programs.

18 Section 15. The Nurses in Advancement Law is amended by  
19 changing Section 1-20 as follows:

20 (110 ILCS 970/1-20) (from Ch. 144, par. 2781-20)

21 Sec. 1-20. Scholarship requirements. It shall be lawful for  
22 any organization to condition any loan or grant upon the  
23 recipient's executing an agreement to commit not more than 5

1 years of his or her professional career to the goals  
2 specifically outlined within the agreement including a  
3 requirement that recipient practice nursing or medicine in  
4 specifically designated practice and geographic areas.

5 Any agreement executed by an organization and any recipient  
6 of loan or grant assistance shall contain a provision for  
7 liquidated damages to be paid for any breach of any provision  
8 of the agreement, or any commitment contained therein, together  
9 with attorney's fees and costs for the enforcement thereof. Any  
10 such covenant shall be valid and enforceable in the courts of  
11 this State as liquidated damages and shall not be considered a  
12 penalty, provided that the provision for liquidated damages  
13 does not exceed \$2,500 for each year remaining for the  
14 performance of the agreement.

15 This Section shall not be construed as pertaining to or  
16 limiting any liquidated damages resulting from scholarships  
17 awarded under the Family Practice and Behavioral Health  
18 Promotion ~~Residency~~ Act.

19 (Source: P.A. 92-651, eff. 7-11-02.)

20 Section 20. The Private Medical Scholarship Agreement Act  
21 is amended by changing Section 3 as follows:

22 (110 ILCS 980/3) (from Ch. 144, par. 2703)

23 Sec. 3. Any such agreement executed by such an organization  
24 and any recipient of loan, grant assistance or recommendation

1 may contain a provision for liquidated damages to be paid for  
2 any breach of any provision of the agreement, or any commitment  
3 contained therein, together with attorney's fees and costs for  
4 the enforcement thereof. Any such covenant shall be valid and  
5 enforceable in the courts of this State as liquidated damages  
6 and shall not be considered a penalty, provided that such  
7 provision for liquidated damages does not exceed \$2,500 for  
8 each year remaining for the performance of such agreement.

9 This Section shall not be construed as pertaining to or  
10 limiting any liquidated damages resulting from scholarships  
11 awarded under the "Family Practice and Behavioral Health  
12 Promotion Residency Act", ~~as amended.~~

13 (Source: P.A. 86-999.)

14 Section 25. The Illinois Public Aid Code is amended by  
15 changing Section 12-4.24a as follows:

16 (305 ILCS 5/12-4.24a) (from Ch. 23, par. 12-4.24a)

17 Sec. 12-4.24a. Report and recommendations concerning  
18 designated shortage area. The Illinois Department shall  
19 analyze payments made to providers of medical services under  
20 Article V of this Code to determine whether any special  
21 compensatory standard should be applied to payments to such  
22 providers in designated shortage areas as defined in Section  
23 3.04 of the Family Practice and Behavioral Health Promotion  
24 Residency Act, ~~as now or hereafter amended.~~ The Illinois

1 Department shall, not later than June 30, 1990, report to the  
2 Governor and the General Assembly concerning the results of its  
3 analysis, and may provide by rule for adjustments in its  
4 payment rates to medical service providers in such areas.

5 (Source: P.A. 92-111, eff. 1-1-02.)

6 Section 99. Effective date. This Act takes effect upon  
7 becoming law.