

Public Health and Hospital Facilities Legislation

As of March 5, 2020

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(ISACo)

HOUSE BILLS			
Bill	Sponsor	Title	Summary
HB 3889	La Shawn K. Ford	PMP-OPIOID TREATMENT PROGRAM	Amends the Illinois Controlled Substances Act. Provides that the requirements for transmitting information to the central repository under the Prescription Monitoring Program also apply to opioid treatment programs that prescribe Schedule II, III, IV, or V controlled substances for the treatment of opioid use disorder.
H-4038	W. Davis	Managed Care Medical Assistance Program Reimbursements	Amends the Medical Assistance Article of the Illinois Public Aid Code. Provides that the methodologies for reimbursement under the managed care medical assistance program shall not be applicable to facilities licensed under the Specialized Mental Health Rehabilitation Act of 2013. Provides that covered services provided by facilities licensed under the Specialized Mental Health Rehabilitation Act of 2013 shall be reimbursed at the rates paid under the Illinois Medicaid fee-for-service methodology.
H-4053	M. Halpin	Nursing Homes-county	Amends the Illinois Public Aid Code. Provides that, for the purposes of the nursing home bed fee, the term "provider" does not include any county that provides skilled nursing or intermediate long-term care services.

H-4079 Support	K. Wheeler	kane co-drug treatment center	<p>Amends Public Act 86-729, which transferred specified property to Kane County for criminal courts complex use. Provides that the property may also be used for a private drug addiction treatment center. Amends the Counties Code. Allows the operation of a private drug addiction treatment center on the property transferred to Kane County in Public Act 86-729. Provides that Kane County may lease portions of the property transferred to Kane County to a not-for-profit or for-profit company for a drug addiction treatment center and share in the drug addiction treatment center revenue. Provides that Kane County may authorize the expenditure of funds for a private drug addiction treatment center on the property transferred to the County. Effective immediately.</p>
H-4122	T. Demmer	hospital basic services rev bd	<p>Amends the Hospital Basic Services Preservation Act. Provides for the dissolution of the Hospital Basic Services Review Board. Provides that the Health Facilities and Services Review Board shall succeed to all of the powers, duties, rights, and property, including contractual rights and obligations, of the Hospital Basic Services Review Board. Makes conforming and other changes.</p>
H-4232 Oppose State Mandate	K. Villa	senior medical transportation	<p>Amends the Counties Code. Provides that the treasurer of a county shall reimburse a senior citizen, who is a resident of the treasurer's county, for public transportation costs incurred by the senior citizen within another county of the State for a medical appointment or medical services after the senior citizen provides specified documentation. Defines terms. Requires a medical provider to provide to a senior citizen, upon request, a completed uniform form, which the Department of Public Health shall prescribe for statewide use. Lists uniform form requirements. Limits home rule powers. Amends the State Mandates Act to require implementation without reimbursement.</p>

H-4331	J. Cabello	electronic monitoring	Amends the Authorized Electronic Monitoring in Long-Term Care Facilities Act. Includes assisted living establishments and shared housing establishments licensed under the Assisted Living and Shared Housing Act in the definition of facility.
H-4342	T. Bennett	opioid treatment program	Amends the Nursing Home Care Act. Allows long-term care facilities to provide an opioid treatment program if they receive written approval from the Department of Public Health. Provides requirements for such an opioid treatment program.
H-4543	E. Welch	Medicaid-rates-assessments	Amends the Illinois Public Aid Code. Provides that for State Fiscal Years 2021 through 2024, an annual assessment on inpatient and outpatient services is imposed on each hospital provider, subject to other specified provisions. Contains provisions concerning a hospital's non-Medicaid gross revenue for State Fiscal Years 2021 and 2022. Contains provisions concerning the assignment of a pool allocation percentage for certain hospitals designated as a Level II trauma center; increased capitation payments to managed care organizations; the extension of certain assessments to July 1, 2022 (rather than July 1, 2020); reimbursements for inpatient general acute care services to non-publicly owned safety net hospitals, non-publicly owned critical access hospitals, hospital providers in high-need communities, and other facilities; the allocation of funds from the transitional access hospital pool; administrative rules for data collection and payment from the health disparities pay-for-collection pool; and other matters. Amends the Illinois Administrative Procedure Act; related clarifications.

H-4551	E. Welch	medicaid-supportive living fac	Amends the Medical Assistance Article of the Illinois Public Aid Code. Provides that supportive living facilities that are approved, but not yet operational, and located in a county with a population of more than 4,000,000 and in a municipality where the average income of its residents is less than 180% of the 2019 poverty guidelines updated periodically in the Federal Register by the U.S. Department of Health and Human Services, may apply at any time to convert up to 25% of its approved supportive living beds to dementia care beds. Requires the Department of Healthcare and Family Services to approve such applications within 90 days of receipt.
H-4632	W. Guzzardi	cottage food operation	Amends the Food Handling Regulation Enforcement Act. Provides that regulation by a State-certified local public health department may include a requirement that the State-certified local public health department provide a certificate of registration for approved cottage food operations, which must be displayed at all events or at the point of sale.
H-4655	D. Mazzochi	fair patient-information	Amends the Fair Patient Billing Act. Provides that if a hospital bills a patient \$50,000 or more for health care services in a period of 72 hours, the hospital shall provide with its bill copies of the electronic records used to generate all charges and shall further itemize any item and make electronic copies of the patient's charts available at the patient's request within 5 days of billing or the date of request, whichever is later. Provides that hospitals must return calls made by patients within 5 calendar days of receipt of the patient request for amounts billed in excess of \$50,000.

H-4657	D. Mazzochi	idph-disinfection innovation	<p>Amends the Department of Public Health Powers and Duties Law of the Civil Administrative Code of Illinois Act.</p> <p>Requires the Department of Public Health to identify at least 2 hospitals that have had over the last 5 years similar reported levels of patients with one or more types of hospital-acquired infections and to solicit proposals from at least one such hospital to conduct a pilot program to install in common hospital touch surfaces antimicrobial metallic material in the rooms of patients likely to be at high risk of hospital-acquired infections. Provides that installation costs for the pilot program shall be classified as capital infrastructure improvements and eligible for capital development grants. Contains specified requirements for the Department regarding the pilot program.</p>
H-4851	N. Manley	Water Quality Assurance	<p>Creates the Water Quality Assurance Act. Provides that new and existing health care facilities and buildings containing health care facilities shall develop and implement water management programs with specified elements to control the growth and spread of opportunistic pathogens. Requires specified persons to develop and implement a routine culture sampling plan for all building water systems. Requires health care facilities to perform remediation of identified opportunistic pathogens. Provides that the Department of Public Health or agent health departments may enter at reasonable times upon private or public property for the purpose of inspecting and investigating conditions relating to the enforcement of the Act. Requires health care facilities to register with the Department all building water systems within 120 days of the Act's effective date and to provide specified information. Contains other provisions; related establishments.</p>

H-4868	M. West, II	nursing home care-records	Amends the Nursing Home Care Act. Requires facilities licensed under the Act to publish a record of all Type AA, Type A, and Type B violations of the facility received from the Department of Public Health for a period of no less than 5 years prior to the amendatory Act's effective date. Provides that the record must be published prominently on the facility's website. Provides disciplinary action for violation of the requirements.
H-4886	S. Reick	Mchenry County Child Services	Creates the McHenry County Children and Family Services Agency Division in the Counties Code (referred to as AJ's Law). Establishes a county children and family services agency in McHenry County for a 5-year period to replace the operations of the Department of Children and Family Services within that county. Provides that the McHenry County children and family services agency shall have all powers and duties of the Department under the Children and Family Services Act and the Abused and Neglected Child Reporting Act. Provides for the appointment of an executive director and employment of employees. Provides for requirements for operation of the county children and family services agency, including unit-based multidisciplinary teams; provides for state funding; also clarifies transfer of power & duties back to the Dept.

HB 4888 Support	J. Gong-Gershowitz	PHARMACEUTICAL TAKE-BACK	<p>Creates the Pharmaceutical Recovery Act. Requires covered manufacturers to, no later than July 1, 2021 or 6 months after becoming a covered manufacturer, whichever is later, participate in an approved drug take-back program or have established and implemented a drug take-back program independently or as part of a group of covered manufacturers. Provides requirements for the drug take-back program and for manufacturer program operators. Requires each manufacturer program operator to submit a proposal for the establishment and implementation of a drug take-back program to the Environmental Protection Agency for review and approval. Contains provisions regarding changes or modifications to drug take-back programs, promotion of drug take-back programs, annual reports, funding, and reimbursement. Requires covered manufacturers and manufacturer program operators to submit an annual \$5,000 registration fee. Provides civil penalties. Creates the Pharmaceutical Take-Back Reimbursement Program Fund and makes a conforming change in the State Finance Act. Contains other provisions. Amends the Freedom of Information Act. Provides that proprietary information submitted to the Environmental Protection Agency under the Pharmaceutical Recovery Act is exempt from inspection and copying under the Act. Effective immediately.</p>
H-4923	N. Hammond	nursing home care-staffing	<p>Amends the Nursing Home Care Act. Provides that a facility that determines that, despite its diligent efforts, it is unable to employ the number of registered nurses under specified minimum staffing requirements may seek a waiver from those requirements regardless of whether or not the facility has been determined by the Department of Public Health to be in violation of those requirements.</p>

H-4998	C. Meier	controlled sub-opioids	Amends the Illinois Controlled Substances Act. Provides that an initial prescription for an opioid may only be issued for a 7-day supply. Defines opioid.
H-5005	L. LaPointe	Idph-prescript Drug Repository	Creates the Prescription Drug Repository Program Act. Requires the Department of Public Health to establish a prescription drug repository program, under which a healthcare facility may donate a prescription drug or supplies needed to administer a prescription drug for use by an individual who meets eligibility criteria specified by the Department. Sets forth requirements that prescription drugs or supplies must meet in order to be accepted and dispensed under the program. Provides that no drugs or supplies donated under the prescription drug repository program may be resold. Provides that nothing in the Act requires that a pharmacy or pharmacist participate in the prescription drug repository program. Provides for civil and criminal immunity for drug and supply manufacturers and pharmacists in relation to the donation, acceptance, or dispensing of prescription drugs or supplies under the prescription drug repository program; amends numerous related acts for conformity and exemption from various related acts.
H-5009 Mandate	K. Cassidy	emergency mnlt hlth care	Creates the Community Emergency Services and Support Act. Provides that every unit of local government that provides emergency medical services for individuals with physical health needs must also provide appropriate emergency response services to individuals experiencing a mental or behavioral health emergency. Amends the Emergency Telephone System Act to make conforming changes.

H-5068	N. Hammond	medicaid-long-term care	Amends the Medical Assistance Article of the Illinois Public Aid Code. Provides that within 120 calendar days (rather than 45 calendar days) of receipt by a long-term care facility of required prescreening information, new admissions with associated admission documents shall be submitted through the Medical Electronic Data Interchange or the Recipient Eligibility Verification System or shall be submitted directly to the Department of Human Services using required admission forms.
H-5086	L. Greenwood	hospitals-postings	Amends the Hospital Licensing Act. Requires hospitals that receive a property tax exemption under a provision of the Property Tax Code concerning exemptions related to access to hospital and health care services by low-income and underserved individuals to post the hospital's charity care policy and the contact information of a financial counselor in a reasonably viewable area in the hospital's emergency room.
H-5132	A. Ortiz	hospitals-executive salaries	Amends the Hospital Licensing Act. Requires hospitals that receive a property tax exemption under a provision of the Property Tax Code concerning exemptions related to access to hospital and health care services by low-income and underserved individuals to prove that, upon inspection by the Department of Public Health, for that fiscal year the amount spent on executive salary increases was equivalent to the amount spent on patients who are recipients under the State medical assistance program or are charity care patients.
H-5164	S. Scherer	civ pro-patient records fee	Amends the Code of Civil Procedure. Removes provisions allowing a health care facility or health care practitioner to charge a patient or a patient's representatives fees for photocopies of patient records. Makes conforming changes.

H-5226	M. Flowers	medicaid-maternal mental hlth	Amends the Medical Assistance Article of the Illinois Public Aid Code. Provides that, to address maternal mental health conditions and reduce the incidence of maternal mortality and morbidity and postpartum depression, pregnant women eligible to receive medical assistance shall receive coverage for prenatal and postnatal support services during pregnancy and during the 24-month period beginning on the last day of the pregnancy. Provides that prenatal and postnatal support services covered under the medical assistance program include, but are not limited to, services provided by doulas, lactation counselors, labor assistants, childbirth educators, community mental health centers or behavioral clinics, social workers, and public health nurses as well as any other evidence-based mental health and social care services that are designed to screen, identify, and manage maternal mental disorders. Permits the Department of Healthcare and Family Services to consult with the Department of Human Services and the Department of Public Health to establish a program of services consistent with the purposes of the amendatory Act. Requires the Department of Healthcare and Family Services to apply for any federal waiver or State Plan amendment required to implement the provisions of the amendatory Act. Requires the Department to adopt rules, upon federal approval, on certification or licensing requirements for providers of prenatal and postnatal support services and rules to provide medical assistance reimbursement for such services.
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H-5233	G. Wehrli	mental health-transfer notice	Amends the Mental Health and Developmental Disabilities Code. Provides that no adult person who is diagnosed as a person with an intellectual disability or a person with a developmental disability may be discharged from a hospital, or similar facility, and transferred to a mental health facility, or any portion thereof, without first notifying a parent or guardian of that individual.
H-5257	L. Robinson, Jr.	hospitals-nursing-legionnaires	Amends the Nursing Home Care Act and the Hospital Licensing Act. Beginning July 1, 2021, requires long-term care facilities licensed under the Nursing Home Care Act and hospitals licensed under the Hospital Licensing Act to prove upon inspection by the Department of Public Health that the long-term care facility or hospital has provided testing for Legionnaires disease and to provide the results of that testing to the Department.
H-5280	E. Welch	medicaid-rates-assessments	Amends the Illinois Public Aid Code. Provides that for State Fiscal Years 2021 through 2024, an annual assessment on inpatient and outpatient services is imposed on each hospital provider, subject to other specified provisions. Contains provisions concerning a hospital's non-Medicaid gross revenue for State Fiscal Years 2021 and 2022. Contains provisions concerning the assignment of a pool allocation percentage for certain hospitals designated as a Level II trauma center; increased capitation payments to managed care organizations; the extension of certain assessments to July 1, 2022 (rather than July 1, 2020); the allocation of funds from the transitional access hospital pool; and other matters. Amends the Emergency Medical Services (EMS) Systems Act. Removes provisions requiring the Department of Public Health to issue a Freestanding Emergency Center license to a facility that has discontinued inpatient hospital services and meets other requirements. Effective immediately.

H-5347	J. Williams	hospitals-financial counselor	Amends the Hospital Licensing Act. Requires hospitals that receive a property tax exemption under a provision of the Property Tax Code concerning exemptions related to access to hospital and health care services by low-income and underserved individuals to refer patients who receive treatment at the hospital's emergency room to a financial counselor before the patient is discharged.
SENATE BILLS			
Bill	Sponsor	Title	Summary
SB 1410 Mandate	L. Murphy	HOSPITALS-METAL DETECTORS	Amends the University of Illinois Hospital Act and Hospital Licensing Act. Provides that a hospital shall maintain a metal detector at each point of entry into the hospital. Provides that a hospital shall ensure that all members of the public, other than the employees of the hospital who display proper credentials, who enter the hospital at a point of entry are subjected to screening by a metal detector. Provides that individuals subject to screening shall include, but not be limited to, individuals in wheelchairs. Defines "point of entry". Effective July 1, 2019.
SB 1864 Support	T. Link	SMOKE FREE ILLINOIS-E-CIG	Amends the Smoke Free Illinois Act. Includes the use of alternative nicotine products and electronic cigarettes in the definition of "smoke" or "smoking". Defines "electronic cigarette", "nicotine", and "tobacco product". Amends the Prevention of Tobacco Use by Minors and Sale and Distribution of Tobacco Products Act. Provides that "alternative nicotine product" does not include electronic cigarettes. Effective January 1, 2020.

S-2340	L. Fine	Controlled Substance - Opioid	Amends the Illinois Controlled Substances Act. Provides that a prescriber who is licensed to prescribe controlled substances shall, prior to issuing a prescription for an opioid that is a Schedule II controlled substance, discuss with a patient who is under 18 years of age and is an emancipated minor, or with the patient's parent or guardian if the patient is under 18 years of age and is not an emancipated minor, the risks of developing a physical or psychological dependence on the opioid and, if the prescriber deems it appropriate, any alternative treatments as may be available. Provides that a prescriber who engages in a discussion required under this provision shall include a note in the patient's medical record indicating that the discussion took place. Provides that the discussion required under this provision shall not be required prior to issuing a prescription to any patient who is currently receiving hospice care from a comprehensive hospice licensed under the Hospice Program Licensing Act.
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S-2529	M. Hastings	medicaid-hospital payments	Amends the Medical Assistance Article of the Illinois Public Aid Code. Provides that on or after July 1, 2020, to receive the additional Long-Acting Injectable for Mental Health or Addiction Medicaid payment, a hospital shall submit a separate professional claim specifying place of service 21 – Inpatient Hospital. Provides that the professional claim shall include the hospital as the billing provider and list the practitioner performing the procedure as the rendering provider. Requires the hospital to use the appropriate Healthcare Common Procedure Coding System Level II procedure code and the National Drug Code. Requires facilities participating in the federal 340B Drug Pricing Program to continue to bill the 340B actual acquisition cost for the medication. Provides that long-acting injectable medications for mental health or addiction shall not be subject to prior authorization under the medical assistance program or under any Medicaid managed-care plans when initiated at an inpatient hospital setting or when continued at an outpatient treatment facility.
S-2541	H. Steans	Medicaid Rates	Amends the Medical Assistance Article of the Illinois Public Aid Code. Provides that for facilities licensed by the Department of Public Health under the ID/DD Community Care Act as ID/DD Facilities and under the MC/DD Act as MC/DD Facilities, subject to federal approval, the rates taking effect on the latter of the approval date of the State Plan Amendment for these facilities or the Waiver Amendment for the home and community-based services settings shall include an increase sufficient to provide a \$0.26 per hour wage increase to the base wage for non-executive staff.

S-2758	L. Murphy	physician assistants- various	Amends the Medical Practice Act of 1987. Provides that a physician licensed to practice medicine in all its branches may collaborate with a physician assistant if specified requirements are met for a collaborative agreement. Provides that a collaborative agreement shall be for services in the same area of practice or specialty as the collaborating physician in his or her clinical medical practice. Amends the Physician Assistant Practice Act of 1987. Deletes language requiring a collaborative agreement to be written for a physician assistant and changes requirements for the collaborative agreement. Provides that medical care provided by a physician assistant shall be consistent with the physician assistant's education, training, and experience. Makes changes to provisions concerning prescriptive authority of a physician assistant. Provides that in a hospital, hospital affiliate, or ambulatory surgical treatment center, the medical staff (instead of the attending physician) shall determine a physician assistant's role in providing care for patients. Changes the physician assistant advisory committee to the Physician Assistant Medical Licensing Board. Changes the membership and duties of the Board. Removes provisions concerning initial terms of office for Board members. Makes conforming and other changes. Effective January 1, 2021.
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S-2971	J. Bertino-Tarrant	nursing homes-gifts	Amends the Assisted Living and Shared Housing Act and the Nursing Home Care Act. Directs assisted living establishments and facilities licensed under the Nursing Home Care Act to institute written policies and procedures regarding the acceptance of personal gifts from a resident or the family member of a resident. Requires assisted living establishments and facilities to include in all employment contracts a provision that prohibits acceptance of a monetary gift from a resident or the family member of a resident, which shall also notify the employee of the need to enter into a repayment agreement to recoup the value of any gift accepted by staff from a resident or the family member of a resident that is not returned promptly. Provides that if the employee agrees to and signs the repayment agreement, the assisted living establishment or facility shall be permitted to withhold up to 15% of the employee's wages per paycheck, or a higher amount from the employee's final compensation, until the employee has paid back the full value of the monetary gift.
S-2983	C. Villanueva	hospitals-patient finances	Amends the Hospital Licensing Act and the University of Illinois Hospital Act. Provides that, except for billing purposes, a hospital may not inquire about a patient's financial status. Provides that a hospital may not treat a patient in a different manner based solely on his or her financial status.

S-3010	O. Aquino	medicaid-rates-assessments	Amends the Illinois Public Aid Code. Provides that for State Fiscal Years 2021 through 2024, an annual assessment on inpatient and outpatient services is imposed on each hospital provider, subject to other specified provisions. Contains provisions concerning a hospital's non-Medicaid gross revenue for State Fiscal Years 2021 and 2022. Contains provisions concerning the assignment of a pool allocation percentage for certain hospitals designated as a Level II trauma center; increased capitation payments to managed care organizations; the extension of certain assessments to July 1, 2022 (rather than July 1, 2020); reimbursements for inpatient general acute care services to non-publicly owned safety net hospitals, non-publicly owned critical access hospitals, hospital providers in high-need communities, and other facilities; the allocation of funds from the transitional access hospital pool; administrative rules for data collection and payment from the health disparities pay-for-collection pool; and other matters. Amends the Illinois Administrative Procedure Act. Provides that the Department of Healthcare and Family Services shall have emergency rulemaking authority to implement the provisions of the amendatory Act concerning assessments. Amends the Emergency Medical Services (EMS) Systems Act. Removes provisions requiring the Department of Public Health to issue a Freestanding Emergency Center license to a facility that has discontinued inpatient hospital services and meets other requirements. Effective immediately.
S-3077	D. Koehler	cottage food operation	Amends the Food Handling Regulation Enforcement Act. Provides that regulation by a State-certified local public health department may include a requirement that the State-certified local public health department provide a certificate of registration for approved cottage food operations, which must be displayed at all events or at the point of sale.

S-3109 Mandate	M. Hunter	school lead testing	<p>Creates the Lead in Schools Reporting Act. Provides that on an annual basis the Department of Public Health, in coordination with local departments of public health, shall conduct specified lead testing at public school facilities. Provides that the Department shall notify the Board and the public school facility if a detected lead level meets a level that the Department deems unsafe. Provides that if a public school facility has received notification from the Department that the lead level in the public school facility has been deemed unsafe, then the public school facility's school board or school personnel must provide written notification to its students' parents or guardians of the Department's findings, including the lead level, no later than 10 calendar days after being notified by the Department.</p>
S-3120	D. Syverson	ins-electronic transactions	<p>Creates the Uniform Electronic Transactions in Health Care Billing Act. Requires all health plan carriers and health care providers to exchange claims and eligibility information electronically using the companion guides, implementation guides, timelines, and standard electronic data interchange transactions for claims submissions, payments, and verification of benefits required under the Health Insurance Portability and Accountability Act in order to be compensable by the health plan carrier. Provides that no health plan carrier or health care provider may add to or modify the uniform companion guides. Provides that the Act applies to all health plan carriers. Grants the Director of Insurance the right to investigate complaints filed under the Act. Sets forth criteria for complaints filed under the Act. Requires the Department of Insurance to adopt rules, and allows the Department to establish exemptions to the Act by regulation. Defines terms. Effective immediately.</p>

S-3172	S. Stadelman	violence prevention-workplace	Amends the Health Care Workplace Violence Prevention Act. Includes nursing homes and hospitals in the definition of health care workplace. Effective January 1, 2021.
S-3266	L. Fine	facility-provided medications	Amends the University of Illinois Hospital Act, the Ambulatory Surgical Treatment Center Act, the Hospital Licensing Act, and the Pharmacy Practice Act. Requires hospitals, facilities, and pharmacies to offer a patient any unused portion of a facility-provided medication upon discharge when it is administered to a patient at the hospital, facility, or pharmacy and is required for continuing treatment. Defines facility-provided medication.

S-3306	D. McConchie	newborn safety device	<p>Amends the Abandoned Newborn Infant Protection Act. Provides that a hospital that is staffed continuously on a 24-hour, 7-day a week basis to provide care to patients in an emergency shall take temporary protective custody of any newborn infant who is left in a newborn safety device that: (1) has been approved by the hospital; (2) is physically located inside the hospital; and (3) is located in an area that is conspicuous and visible to hospital staff. Provides that a fire station, emergency medical facility, or police station that is staffed by an emergency medical services provider on a 24-hour, 7-day a week basis shall take temporary protective custody of a newborn infant who is voluntarily left in a newborn safety device that: (i) is located at the fire station, emergency medical facility, or police station; (ii) is located in an area that is conspicuous and visible to staff; and (iii) includes an adequate dual alarm system connected to the site that is tested at least one time per month to ensure the alarm system is in working order. Provides that a hospital, fire station, emergency medical facility, or police station is immune from civil liability for an act or omission relating to the operation of the newborn safety device unless the act or omission constitutes gross negligence or willful or wanton misconduct. Provides that any person who in good faith voluntarily leaves a newborn infant in a newborn safety device as provided in the amendatory Act is not obligated to disclose the parent's name or the person's name. Requires hospitals, fire stations, emergency medical facilities, and police stations to post conspicuous signs informing persons that a newborn infant may be left in a newborn safety device located at the facility. Expands the definition of relinquish to mean to voluntarily leave a newborn infant, who a licensed physician reasonably believes is 30 days old or less, in a newborn safety device.</p>
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S-3449 Mandate	R. Peters	emergency mntl hlth care	Creates the Community Emergency Services and Support Act. Provides that every unit of local government that provides emergency medical services for individuals with physical health needs must also provide appropriate emergency response services to individuals experiencing a mental or behavioral health emergency. Amends the Emergency Telephone System Act to make conforming changes.
S-3522	C. Belt	health care worker-corrections	Amends the Health Care Worker Background Check Act. Provides that health care employer includes the Department of Corrections or a third-party vendor employing certified nursing assistants working with the Department of Corrections. Effective immediately.

S-3525	S. Feigenholtz	community mental health reform	<p>Creates the Community Mental Health Reform Act. Requires the Department of Healthcare and Family Services, in partnership with the Department of Human Services, to revise administrative rules and other Department policies and practices concerning certification and service requirements for community mental health centers and behavioral health clinics. Provides that the primary goal of revising the administrative rules and Department policies is to develop a modernized regulatory framework that: (1) fosters the provision of services that results in the best mental health and health outcomes and is consistent with a Medicaid managed care environment; (2) enables innovation and integrated mental and physical health care; (3) harnesses the modern mental health workforce; and (4) reduces unnecessary process barriers that do not offer meaningful clinical value and that act as a barrier to treatment. Requires the Department of Human Services to revise administrative rules concerning the Medicaid Community Mental Health Services Program to be consistent with changes made to administrative rules concerning certification and service requirements for community mental health centers and behavioral health clinics. Contains provisions concerning reducing client mental health assessments; enabling workforce expertise for certain roles on multidisciplinary, team-based treatment models; streamlining fee-for-service documentation requirements to enable increased time for client care; the establishment of a working group of community mental health centers and behavioral health clinics; and other matters. Effective immediately.</p>
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S-3636	K. Lightford	revenue-nurse educators	<p>Amends the Hospital Licensing Act. Requires a hospital to provide a plan of correction to the Department of Public Health within 60 days if the hospital demonstrates a pattern or practice of failing to substantially comply with specified requirements or with the hospital's written staffing plan. Allows the Department to impose specified fines on a hospital for failing to comply with written staffing plans for nursing services or plans of correction. Requires money from fines to be deposited into the Hospital Licensure Fund (instead of the Long Term Care Provider Fund). Contains provisions concerning staffing plans. Amends the Nursing Education Scholarship Law. Provides that the Department of Public Health may award a total of \$500,000 annually in nursing education scholarships. Amends the Illinois Income Tax Act. Creates an income tax credit for taxpayers who are employed during the taxable year as nurse educators. Provides that the credit shall be equal to 2.5% of the taxpayer's federal adjusted gross income for the taxable year. Effective immediately, except that provisions amending the Hospital Licensing Act take effect on the first day of the first full calendar month that begins 6 months after the Act becomes law.</p>
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S-3753 Mandate	J. Morrison	surgical smoke evacuation	<p>Amends the University of Illinois Hospital Act, the Ambulatory Surgical Treatment Center Act, and the Hospital Licensing Act. Requires hospitals organized under the University of Illinois Hospital Act or licensed under the Hospital Licensing Act and ambulatory surgical treatment centers licensed under the Ambulatory Surgical Treatment Center Act to: adopt policies to ensure the elimination of surgical smoke by use of a surgical smoke evacuation system for each procedure that generates surgical smoke from the use of energy-based devices, including electrosurgery and lasers; and report to the Department of Public Health within 90 days after the amendatory Act's effective date that the policies have been adopted.</p>
S-3730	S. Feigenholtz	nursing home care-skilled care	<p>Amends the Nursing Home Care Act. Provides that the definition of skilled care includes some specified actions, but does not include others. Defines terms for purposes of imposing specified monetary penalties. Provides that for the purposes of imposing specified monetary penalties, the Department of Public Health must not count each individual day as an occurrence and any unforeseen circumstance that occurs for a continuous period only counts as one time. Amends the Illinois Public Aid Code. Provides that, if all other requirements for coverage under a Medicaid skilled nursing facility benefit are met, skilled nursing services shall be covered under specified circumstances.</p>