100TH GENERAL ASSEMBLY

State of Illinois

2017 and 2018

HB3852

by Rep. Michael D. Unes

SYNOPSIS AS INTRODUCED:

410 ILCS 70/1a 410 ILCS 70/2 410 ILCS 70/2.1 410 ILCS 70/2.2	from Ch. 111 1/2, par. 87-1a from Ch. 111 1/2, par. 87-2 from Ch. 111 1/2, par. 87-2.1
410 ILCS 70/3 410 ILCS 70/5 410 ILCS 70/5.5	from Ch. 111 1/2, par. 87-3 from Ch. 111 1/2, par. 87-5
410 ILCS 70/6.1 410 ILCS 70/6.2 410 ILCS 70/6.4 410 ILCS 70/6.5	from Ch. 111 1/2, par. 87-6.1 from Ch. 111 1/2, par. 87-6.2 from Ch. 111 1/2, par. 87-6.4
410 ILCS 70/6.6 410 ILCS 70/7 410 ILCS 70/7.5	from Ch. 111 1/2, par. 87-7
410 ILCS 70/8 410 ILCS 70/9	from Ch. 111 1/2, par. 87-8 from Ch. 111 1/2, par. 87-9

Amends the Sexual Assault Survivors Emergency Treatment Act. Defines "eligible health care facility" as a hospital, emergency department, or outpatient clinic that delivers health care, including, but not limited to, care for a sexual assault survivor. Changes references from "hospital" to "eligible health care facility" and makes conforming changes. Changes references from "hospital emergency services" to "emergency services". Provides that sexual assault nurse examiners who examine pediatric patients should have completed specified training and have a specified certification. Makes other changes. Effective immediately.

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FISCAL NOTE ACT MAY APPLY

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AN ACT concerning health.

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

Section 5. The Sexual Assault Survivors Emergency
Treatment Act is amended by changing Sections 1a, 2, 2.1, 2.2,
3, 5, 5.5, 6.1, 6.2, 6.4, 6.5, 6.6, 7, 7.5, 8, and 9 as follows:

7 (410 ILCS 70/1a) (from Ch. 111 1/2, par. 87-1a)

8 Sec. 1a. Definitions. In this Act:

9 "Ambulance provider" means an individual or entity that 10 owns and operates a business or service using ambulances or 11 emergency medical services vehicles to transport emergency 12 patients.

13 "Areawide sexual assault treatment plan" means a plan, 14 developed by the <u>eliqible health care facilities</u> hospitals in 15 the community or area to be served, which provides for hospital 16 emergency services to sexual assault survivors that shall be 17 made available by each of the participating <u>eliqible health</u> 18 care facilities hospitals.

19 "Department" means the Department of Public Health.

20 <u>"Eligible health care facility" means a hospital,</u> 21 <u>emergency department, or outpatient clinic that delivers</u> 22 <u>health care, including, but not limited to, care for a sexual</u> 23 <u>assault survivor.</u>

1 "Emergency contraception" means medication as approved by 2 the federal Food and Drug Administration (FDA) that can 3 significantly reduce the risk of pregnancy if taken within 72 4 hours after sexual assault.

5 <u>"Emergency services" means health care delivered to</u> 6 <u>outpatients within or under the care and supervision of</u> 7 <u>personnel working in a designated emergency department of a</u> 8 <u>hospital or outpatient clinic of an eligible health facility,</u> 9 <u>including, but not limited to, care ordered by such personnel</u> 10 <u>for a sexual assault survivor.</u>

11 "Follow-up healthcare" means healthcare services related 12 to a sexual assault, including laboratory services and pharmacy 13 services, rendered within 90 days of the initial visit for 14 hospital emergency services.

15 "Forensic services" means the collection of evidence 16 pursuant to a statewide sexual assault evidence collection 17 program administered by the Department of State Police, using 18 the Illinois State Police Sexual Assault Evidence Collection 19 Kit.

20 "Health care professional" means a physician, a physician21 assistant, or an advanced practice nurse.

22 "Hospital" has the meaning given to that term in the 23 Hospital Licensing Act.

24 "Hospital emergency services" means healthcare delivered 25 to outpatients within or under the care and supervision of 26 personnel working in a designated emergency department of a

1 hospital, including, but not limited to, care ordered by such 2 personnel for a sexual assault survivor in the emergency 3 department.

"Illinois State Police Sexual Assault Evidence Collection
Kit" means a prepackaged set of materials and forms to be used
for the collection of evidence relating to sexual assault. The
standardized evidence collection kit for the State of Illinois
shall be the Illinois State Police Sexual Assault Evidence
Collection Kit.

10 "Law enforcement agency having jurisdiction" means the law 11 enforcement agency in the jurisdiction where an alleged sexual 12 assault or sexual abuse occurred.

13 "Nurse" means a nurse licensed under the Nurse Practice 14 Act.

15 "Physician" means a person licensed to practice medicine in 16 all its branches.

"Sexual assault" means an act of nonconsensual sexual conduct or sexual penetration, as defined in Section 11-0.1 of the Criminal Code of 2012, including, without limitation, acts prohibited under Sections 11-1.20 through 11-1.60 of the Criminal Code of 2012.

22 <u>"Sexual assault nurse examiner" means a registered nurse</u>
23 who has completed a sexual assault nurse examiner (SANE)
24 training program that meets the Forensic Sexual Assault Nurse
25 Examiner Education Guidelines established by the International
26 Association of Forensic Nurses with separate certification for

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adult and pediatric sexual assault care.

2 "Sexual assault survivor" means a person who presents for 3 hospital emergency services to an eligible health care facility 4 in relation to injuries or trauma resulting from a sexual 5 assault.

6 "Sexual assault transfer plan" means a written plan 7 developed by <u>an eliqible health care facility</u> a hospital and 8 approved by the Department, which describes the <u>eliqible health</u> 9 <u>care facility's hospital's</u> procedures for transferring sexual 10 assault survivors to another <u>eliqible health care facility</u> 11 <u>hospital</u> in order to receive emergency treatment.

12 "Sexual assault treatment plan" means a written plan 13 developed by an eligible healthcare facility a hospital that describes the eligible health care facility's hospital's 14 procedures and protocols for providing hospital emergency 15 16 services and forensic services to sexual assault survivors who 17 present themselves for such services, either directly or through transfer from another eligible healthcare facility 18 19 hospital.

20 "Transfer services" means the appropriate medical screening examination and necessary stabilizing treatment 21 22 prior to the transfer of a sexual assault survivor to an 23 eligible healthcare facility a hospital that provides hospital emergency services and forensic services to sexual assault 24 25 survivors pursuant to a sexual assault treatment plan or 26 areawide sexual assault treatment plan.

1 "Voucher" means a document generated by <u>an eligible health</u>
2 <u>care facility</u> a hospital at the time the sexual assault
3 survivor receives hospital emergency and forensic services
4 that a sexual assault survivor may present to providers for
5 follow-up healthcare.

6 (Source: P.A. 99-454, eff. 1-1-16; 99-801, eff. 1-1-17.)

7 (410 ILCS 70/2) (from Ch. 111 1/2, par. 87-2)

8 Sec. 2. Eligible health care facility Hospital 9 requirements. Every eligible health care facility hospital 10 required to be licensed by the Department pursuant to the 11 Hospital Licensing Act, approved July 1, 1953, as now or 12 hereafter amended, or licensed by the Department under any 13 other applicable law, or that is regulated by a State or federal agency governing outpatient facilities, which provides 14 15 general medical and surgical hospital services shall provide 16 either (i) transfer services or (ii) hospital emergency 17 services and forensic services, in accordance with rules and regulations adopted by the Department, to all sexual assault 18 survivors who apply for either (i) transfer services or (ii) 19 20 hospital emergency services and forensic services in relation 21 to injuries or trauma resulting from the sexual assault.

In addition, every such <u>eligible health care facility</u> hospital, regardless of whether or not a request is made for reimbursement, shall submit to the Department a plan to provide either (i) transfer services or (ii) <u>hospital</u> emergency

services and forensic services to sexual assault survivors. 1 2 Such plan shall be submitted within 60 days after receipt of 3 the Department's request for this plan, to the Department for approval prior to such plan becoming effective. The Department 4 5 shall approve such plan for either (i) transfer services or 6 (ii) hospital emergency services and forensic services to 7 sexual assault survivors if it finds that the implementation of 8 the proposed plan would provide adequate (i) transfer services 9 or (ii) hospital emergency services and forensic services for 10 sexual assault survivors and provide sufficient protections 11 from the risk of pregnancy to sexual assault survivors.

12 The Department shall periodically conduct on site reviews 13 of such approved plans with <u>eligible health care facility</u> 14 hospital personnel to insure that the established procedures 15 are being followed.

On January 1, 2007, and each January 1 thereafter, the 16 17 Department shall submit a report to the General Assembly containing information on the eligible health care facilities 18 hospitals in this State that have submitted a plan to provide 19 either (i) transfer services or (ii) hospital emergency 20 services and forensic services to sexual assault survivors. The 21 22 Department shall post on its Internet website the report 23 required in this Section. The report shall include all of the following: 24

25 (1) A list of all <u>eligible health care facilities</u>
 26 hospitals that have submitted a plan.

(2) A list of eligible health care facilities hospitals 1 2 whose plans have been found by the Department to be in compliance with this Act. 3 (3) A list of eligible health care facilities hospitals 4 5 that have failed to submit an acceptable Plan of Correction within the time required by Section 2.1 of this Act. 6 7 (4) A list of eligible health care facilities hospitals 8 at which the periodic site review required by this Act has 9 been conducted. When an eligible health care facility a hospital listed as 10 11 noncompliant under item (3) of this Section submits and 12 implements the required Plan of Correction, the Department 13 shall immediately update the report on its Internet website to reflect that eligible health care facility's hospital's 14 15 compliance. 16 (Source: P.A. 94-762, eff. 5-12-06; 95-432, eff. 1-1-08.) 17 (410 ILCS 70/2.1) (from Ch. 111 1/2, par. 87-2.1) Sec. 2.1. Plan of correction; penalties. If the Department 18 surveyor determines that the eligible health care facility 19 hospital is not in compliance with its approved plan, the 20 21 surveyor shall provide the eliqible health care facility 22 hospital with a written list of the specific items of noncompliance within 10 working days after the conclusion of 23 24 the on site review. The eligible health care facility hospital

25 shall have 10 working days to submit to the Department a plan

of correction which contains the <u>eligible health care</u> <u>facility's hospital's</u> specific proposals for correcting the items of noncompliance. The Department shall review the plan of correction and notify the <u>eligible health care facility</u> <u>hospital</u> in writing within 10 working days as to whether the plan is acceptable or unacceptable.

7 Ιf the Department finds the Plan of Correction 8 unacceptable, the eliqible health care facility hospital shall 9 have 10 working days to resubmit an acceptable Plan of 10 Correction. Upon notification that its Plan of Correction is 11 acceptable, an eligible health care facility a hospital shall 12 implement the Plan of Correction within 60 days.

13 The failure to submit an acceptable Plan of Correction or 14 to implement the Plan of Correction, within the time frames 15 required in this Section, will subject <u>an eliqible health care</u> 16 <u>facility a hospital</u> to the imposition of a fine by the 17 Department. The Department may impose a fine of up to \$500 per 18 day until <u>an eliqible health care facility</u> a hospital complies 19 with the requirements of this Section.

Before imposing a fine pursuant to this Section, the Department shall provide the <u>eligible health care facility</u> <u>hospital</u> via certified mail with written notice and an opportunity for an administrative hearing. Such hearing must be requested within 10 working days after receipt of the Department's Notice. All hearings shall be conducted in accordance with the Department's rules in administrative

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1 hearings.

2 (Source: P.A. 94-762, eff. 5-12-06; 95-432, eff. 1-1-08.)

3 (410 ILCS 70/2.2)

4 Sec. 2.2. Emergency contraception.

5 (a) The General Assembly finds:

6 (1) Crimes of sexual assault and sexual abuse cause 7 significant physical, emotional, and psychological trauma 8 to the victims. This trauma is compounded by a victim's 9 fear of becoming pregnant and bearing a child as a result 10 of the sexual assault.

(2) Each year over 32,000 women become pregnant in the
United States as the result of rape and approximately 50%
of these pregnancies end in abortion.

14 (3) As approved for use by the Federal Food and Drug
15 Administration (FDA), emergency contraception can
16 significantly reduce the risk of pregnancy if taken within
17 72 hours after the sexual assault.

18 (4) By providing emergency contraception to rape
19 victims in a timely manner, the trauma of rape can be
20 significantly reduced.

(b) Within 120 days after the effective date of this amendatory Act of the 92nd General Assembly, every <u>eligible</u> <u>health care facility</u> hospital providing services to sexual assault survivors in accordance with a plan approved under Section 2 must develop a protocol that ensures that each

1 survivor of sexual assault will receive medically and factually 2 accurate and written and oral information about emergency contraception; the indications and counter-indications and 3 risks associated with the use of emergency contraception; and a 4 5 description of how and when victims may be provided emergency 6 contraception upon the written order of a physician licensed to 7 practice medicine in all its branches, a licensed advanced 8 practice nurse, or a licensed physician assistant. The 9 Department shall approve the protocol if it finds that the 10 implementation of the protocol would provide sufficient 11 protection for survivors of sexual assault.

12 The eligible health care facility hospital shall implement 13 the protocol upon approval by the Department. The Department shall adopt rules and regulations establishing one or more safe 14 15 harbor protocols and setting minimum acceptable protocol 16 standards that eligible health care facilities hospitals may 17 develop and implement. The Department shall approve any protocol that meets those standards. The Department may provide 18 19 a sample acceptable protocol upon request.

20 (Source: P.A. 99-173, eff. 7-29-15.)

21 (410 ILCS 70/3) (from Ch. 111 1/2, par. 87-3)

22 Sec. 3. Areawide sexual assault treatment plans; 23 submission. <u>Eligible health care facilities</u> Hospitals in the 24 area to be served may develop and participate in areawide plans 25 that shall describe the hospital emergency services and

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1 forensic services to sexual assault survivors that each 2 participating eligible health care facility hospital has 3 agreed to make available. Each eligible health care facility hospital participating in such a plan shall provide such 4 5 services as it is designated to provide in the plan agreed upon by the participants. Areawide plans may include eligible health 6 7 care facility hospital transfer plans. All areawide plans shall 8 be submitted to the Department for approval, prior to becoming 9 effective. The Department shall approve a proposed plan if it 10 finds that the implementation of the plan would provide for 11 appropriate hospital emergency services and forensic services 12 for the people of the area to be served.

13 (Source: P.A. 95-432, eff. 1-1-08.)

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14 (410 ILCS 70/5) (from Ch. 111 1/2, par. 87-5)

Sec. 5. Minimum requirements for <u>eligible health care</u> <u>facilities hospitals</u> providing hospital emergency services and forensic services to sexual assault survivors.

(a) Every <u>eliqible health care facility</u> hospital providing
hospital emergency services and forensic services to sexual
assault survivors under this Act shall, as minimum requirements
for such services, provide, with the consent of the sexual
assault survivor, and as ordered by the attending physician, an
advanced practice nurse, or a physician assistant, the
following:

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(1) appropriate medical examinations and laboratory

1 tests required to ensure the health, safety, and welfare of a sexual assault survivor or which may be used as evidence 2 3 in a criminal proceeding against a person accused of the sexual assault, or both; and records of the results of such 4 5 examinations and tests shall be maintained by the eligible health care facility hospital and made available to law 6 7 enforcement officials upon the request of the sexual 8 assault survivor;

9 (2) appropriate oral and written information 10 concerning the possibility of infection, sexually 11 transmitted disease and pregnancy resulting from sexual 12 assault;

13 (3) appropriate oral and written information 14 concerning accepted medical procedures, medication, and 15 possible contraindications of such medication available 16 for the prevention or treatment of infection or disease 17 resulting from sexual assault;

18 (4) an amount of medication for treatment at the 19 <u>eliqible health care facility hospital</u> and after discharge 20 as is deemed appropriate by the attending physician, an 21 advanced practice nurse, or a physician assistant and 22 consistent with the <u>eliqible health care facility's</u> 23 hospital's current approved protocol for sexual assault 24 survivors;

(5) an evaluation of the sexual assault survivor's risk
 of contracting human immunodeficiency virus (HIV) from the

sexual assault;

2 (6) written and oral instructions indicating the need 3 for follow-up examinations and laboratory tests after the 4 sexual assault to determine the presence or absence of 5 sexually transmitted disease;

6 (7) referral by <u>eligible health care facility hospital</u>
7 personnel for appropriate counseling; and

8 (8) when HIV prophylaxis is deemed appropriate, an 9 initial dose or doses of HIV prophylaxis, along with 10 written and oral instructions indicating the importance of 11 timely follow-up healthcare.

(b) Any person who is a sexual assault survivor who seeks emergency hospital services and forensic services or follow-up healthcare under this Act shall be provided such services without the consent of any parent, guardian, custodian, surrogate, or agent.

17 (b-5) Every treating eligible health care facility hospital providing hospital emergency and forensic services to 18 sexual assault survivors shall issue a voucher to any sexual 19 20 assault survivor who is eligible to receive one. The eligible health care facility hospital shall make a copy of the voucher 21 22 and place it in the medical record of the sexual assault 23 survivor. The eligible health care facility hospital shall provide a copy of the voucher to the sexual assault survivor 24 25 after discharge upon request.

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(c) Nothing in this Section creates a physician-patient

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<u>care facility</u> a hospital, health care professional,
 laboratory, or pharmacy to provide follow-up healthcare to a
 sexual assault survivor.

4 (Source: P.A. 99-173, eff. 7-29-15.)

5 (410 ILCS 70/6.1) (from Ch. 111 1/2, par. 87-6.1)

standards. The 6 Sec. 6.1. Minimum Department shall 7 prescribe minimum standards, rules, and regulations necessary 8 to implement this Act, which shall apply to every eligible 9 health care facility hospital required to be licensed by the 10 Department that provides general medical and surgical hospital 11 services. Such standards shall include, but not be limited to, 12 a uniform system for recording results of medical examinations and all diagnostic tests performed in connection therewith to 13 14 determine the condition and necessary treatment of sexual 15 assault survivors, which results shall be preserved in a 16 confidential manner as part of the eligible health care facility's hospital record of the sexual assault survivor. 17

18 (Source: P.A. 95-432, eff. 1-1-08.)

19 (410 ILCS 70/6.2) (from Ch. 111 1/2, par. 87-6.2)

20 Sec. 6.2. Assistance and grants. The Department shall 21 assist in the development and operation of programs which 22 provide hospital emergency services and forensic services to 23 sexual assault survivors, and, where necessary, to provide 24 grants to <u>eliqible health care facilities</u> hospitals for this

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- 1 purpose.
- 2 (Source: P.A. 95-432, eff. 1-1-08.)

3 (410 ILCS 70/6.4) (from Ch. 111 1/2, par. 87-6.4)

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Sec. 6.4. Sexual assault evidence collection program.

5 (a) There is created a statewide sexual assault evidence 6 collection program to facilitate the prosecution of persons 7 accused of sexual assault. This program shall be administered by the Illinois State Police. The program shall consist of the 8 9 following: (1)distribution of sexual assault evidence 10 collection kits which have been approved by the Illinois State 11 Police to eligible health care facilities hospitals that 12 request them, or arranging for such distribution by the 13 manufacturer of the kits, (2) collection of the kits from eligible health care facilities hospitals after the kits have 14 15 been used to collect evidence, (3) analysis of the collected 16 evidence and conducting of laboratory tests, (4) maintaining the chain of custody and safekeeping of the evidence for use in 17 18 a legal proceeding, and (5) the comparison of the collected 19 evidence with the genetic marker grouping analysis information maintained by the Department of State Police under Section 20 21 5-4-3 of the Unified Code of Corrections and with the 22 information contained in the Federal Bureau of Investigation's National DNA database; provided the amount and quality of 23 24 genetic marker grouping results obtained from the evidence in 25 the sexual assault case meets the requirements of both the

State Police and the Federal Bureau of 1 Department of 2 Investigation's Combined DNA Index System (CODIS) policies. The standardized evidence collection kit for the State of 3 Illinois shall be the Illinois State Police Sexual Assault 4 5 Evidence Kit and shall include a written consent form authorizing law enforcement to test the sexual assault evidence 6 7 and to provide law enforcement with details of the sexual 8 assault.

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(a-5) (Blank).

10 (b) The Illinois State Police shall administer a program to 11 train eligible health care facilities hospitals and eligible 12 health care facility hospital personnel participating in the 13 sexual assault evidence collection program, in the correct use and application of the sexual assault evidence collection kits. 14 15 A sexual assault nurse examiner may conduct examinations using 16 the sexual assault evidence collection kits, without the 17 presence or participation of a physician. The Department shall cooperate with the Illinois State Police in this program as it 18 19 pertains to medical aspects of the evidence collection.

(c) <u>Sexual assault nurse examiners who examine pediatric</u>
<u>patients should have completed pediatric sexual assault nurse</u>
<u>examiner training and be certified by the International</u>
<u>Association of Forensic Nurses.</u> In this Section, "sexual
<u>assault nurse examiner" means a registered nurse who has</u>
<u>completed a sexual assault nurse examiner (SANE) training</u>
<u>program that meets the Forensic Sexual Assault Nurse Examiner</u>

Education Guidelines established by the International Association of Forensic Nurses.

3 (Source: P.A. 99-801, eff. 1-1-17.)

4 (410 ILCS 70/6.5)

Sec. 6.5. Written consent to the release of sexual assault
evidence for testing.

7 (a) Upon the completion of hospital emergency services and forensic services, the health care professional providing the 8 9 forensic services shall provide the patient the opportunity to 10 sign a written consent to allow law enforcement to submit the 11 sexual assault evidence for testing. The written consent shall 12 be on a form included in the sexual assault evidence collection kit and shall include whether the survivor consents to the 13 release of information about the sexual assault to 14 law 15 enforcement.

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(1) A survivor 13 years of age or older may sign the written consent to release the evidence for testing.

18 (2) If the survivor is a minor who is under 13 years of
19 age, the written consent to release the sexual assault
20 evidence for testing may be signed by the parent, guardian,
21 investigating law enforcement officer, or Department of
22 Children and Family Services.

(3) If the survivor is an adult who has a guardian of
the person, a health care surrogate, or an agent acting
under a health care power of attorney, the consent of the

guardian, surrogate, or agent is not required to release 1 2 evidence and information concerning the sexual assault or 3 sexual abuse. If the adult is unable to provide consent for the release of evidence and information and a quardian, 4 5 surrogate, or agent under a health care power of attorney is unavailable or unwilling to release the information, 6 7 investigating law enforcement officer then an may 8 authorize the release.

9 (4) Any health care professional, including any 10 physician, advanced practice nurse, physician assistant, 11 or nurse, sexual assault nurse examiner, and any health 12 care institution, including any eligible health care facility hospital, who provides evidence or information to 13 a law enforcement officer under a written consent as 14 15 specified in this Section is immune from any civil or 16 professional liability that might arise from those 17 actions, with the exception of willful or wanton misconduct. The immunity provision applies only if all of 18 the requirements of this Section are met. 19

20 (b) The <u>eligible health care facility</u> hospital shall keep a 21 copy of a signed or unsigned written consent form in the 22 patient's medical record.

(c) If a written consent to allow law enforcement to test the sexual assault evidence is not signed at the completion of hospital emergency services and forensic services, the <u>eliqible health care facility</u> hospital shall include the – 20 – LRB100 11373 MJP 21764 b

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following information in its discharge instructions:

(1) the sexual assault evidence will be stored for 5
years from the completion of an Illinois State Police
Sexual Assault Evidence Collection Kit, or 5 years from the
age of 18 years, whichever is longer;

6 (2) a person authorized to consent to the testing of 7 the sexual assault evidence may sign a written consent to allow law enforcement to test the sexual assault evidence 8 9 at any time during that 5-year period for an adult victim, 10 or until a minor victim turns 23 years of age by (A) 11 contacting the law enforcement agency having jurisdiction, 12 or if unknown, the law enforcement agency contacted by the eligible health care facility hospital under Section 3.2 of 13 14 the Criminal Identification Act; or (B) by working with an 15 advocate at a rape crisis center or child advocacy center;

16 (3) the name, address, and phone number of the law 17 enforcement agency having jurisdiction, or if unknown the 18 name, address, and phone number of the law enforcement 19 agency contacted by the <u>eligible health care facility</u> 20 <u>hospital</u> under Section 3.2 of the Criminal Identification 21 Act; and

(4) the name and phone number of a local rape crisis
center <u>or child advocacy center</u>.
(Source: P.A. 99-801, eff. 1-1-17.)

25 (410 ILCS 70/6.6)

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Sec. 6.6. Submission of sexual assault evidence.

2 (a) As soon as practicable, but in no event more than 4 3 hours after the completion of hospital emergency services and forensic services, the eligible health care facility hospital 4 5 shall make reasonable efforts to determine the law enforcement agency having jurisdiction where the sexual assault occurred. 6 The eligible health care facility hospital may obtain the name 7 of the law enforcement agency with jurisdiction from the local 8 9 law enforcement agency.

Within 4 hours after the completion of hospital 10 (b) 11 emergency services and forensic services, the eligible health 12 care facility hospital shall notify the law enforcement agency 13 having jurisdiction that the eligible health care facility hospital is in possession of sexual assault evidence and the 14 date and time the collection of evidence was completed. The 15 16 eligible health care facility hospital shall document the 17 notification in the patient's medical records and shall include the agency notified, the date and time of the notification and 18 the name of the person who received the notification. This 19 20 notification to the law enforcement agency having jurisdiction eligible health care facility hospital's 21 satisfies the 22 requirement to contact its local law enforcement agency under 23 Section 3.2 of the Criminal Identification Act.

(c) If the law enforcement agency having jurisdiction has
not taken physical custody of sexual assault evidence within 5
days of the first contact by the <u>eliqible health care facility</u>

hospital, the eligible health care facility hospital shall 1 2 renotify re-notify the law enforcement agency having 3 jurisdiction that the eligible health care facility hospital is in possession of sexual assault evidence and the date the 4 5 sexual assault evidence was collected. The eligible health care 6 facility hospital shall document the renotification 7 re notification in the patient's medical records and shall 8 include the agency notified, the date and time of the 9 notification and the name of the person who received the 10 notification.

(d) If the law enforcement agency having jurisdiction has 11 12 not taken physical custody of the sexual assault evidence within 10 days of the first contact by the eligible health care 13 14 facility hospital and the eligible health care facility 15 hospital has provided renotification under subsection (c) of 16 this Section, the eligible health care facility hospital shall 17 contact the State's Attorney of the county where the law enforcement agency having jurisdiction 18 is located. The 19 eligible health care facility hospital shall inform the State's Attorney that the eligible health care facility hospital is in 20 possession of sexual assault evidence, the date the sexual 21 22 assault evidence was collected, the law enforcement agency 23 having jurisdiction, the dates, times and names of persons notified under subsections (b) and (c) of this Section. The 24 25 notification shall be made within 14 days of the collection of the sexual assault evidence. 26

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1 (Source: P.A. 99-801, eff. 1-1-17; revised 10-26-16.)

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(410 ILCS 70/7) (from Ch. 111 1/2, par. 87-7)

3 Sec. 7. Reimbursement.

4 (a) An eligible health care facility A hospital or health 5 care professional furnishing hospital emergency services or 6 forensic services, an ambulance provider furnishing 7 transportation to a sexual assault survivor, an eligible health care facility a hospital, health care professional, or 8 9 laboratory providing follow-up healthcare, or a pharmacy 10 dispensing prescribed medications to any sexual assault 11 survivor shall furnish such services or medications to that 12 person without charge and shall seek payment as follows:

13 (1) If a sexual assault survivor is eligible to receive 14 benefits under the medical assistance program under 15 Article V of the Illinois Public Aid Code, the ambulance 16 provider, eligible health care facility hospital, health care professional, laboratory, or pharmacy must submit the 17 18 bill to the Department of Healthcare and Family Services or 19 the appropriate Medicaid managed care organization and 20 accept the amount paid as full payment.

(2) If a sexual assault survivor is covered by one or
more policies of health insurance or is a beneficiary under
a public or private health coverage program, the ambulance
provider, <u>eligible health care facility</u> hospital, health
care professional, laboratory, or pharmacy shall bill the

1 insurance company or program. With respect to such insured 2 patients, applicable deductible, co-pay, co-insurance, 3 denial of claim, other or any out-of-pocket insurance-related expense may be submitted to the Illinois 4 5 Sexual Assault Emergency Treatment Program of the 6 Department of Healthcare and Family Services in accordance 7 with 89 Ill. Adm. Code 148.510 for payment at the 8 Department of Healthcare and Family Services' allowable 9 rates under the Illinois Public Aid Code. The ambulance 10 provider, eligible health care facility hospital, health 11 care professional, laboratory, or pharmacy shall accept 12 amounts paid by the insurance company or health the 13 coverage program and the Illinois Sexual Assault Treatment 14 Program as full payment.

15 (3) If a sexual assault survivor is neither eligible to 16 receive benefits under the medical assistance program 17 under Article V of the Public Aid Code nor covered by a policy of insurance or a public or private health coverage 18 19 program, the ambulance provider, eligible health care 20 facility hospital, health care professional, laboratory, 21 or pharmacy shall submit the request for reimbursement to 22 the Illinois Sexual Assault Emergency Treatment Program 23 under the Department of Healthcare and Family Services in 24 accordance with 89 Ill. Adm. Code 148.510 at the Department 25 of Healthcare and Family Services' allowable rates under 26 the Illinois Public Aid Code.

1 (4) If a sexual assault survivor presents a voucher for 2 follow-up healthcare, the healthcare professional or 3 laboratory that provides follow-up healthcare or the pharmacy that dispenses prescribed medications to a sexual 4 5 assault survivor shall submit the request for 6 reimbursement for follow-up healthcare, laboratory, or 7 pharmacy services to the Illinois Sexual Assault Emergency 8 Treatment Program under the Department of Healthcare and 9 Family Services in accordance with 89 Ill. Adm. Code 10 148.510 at the Department of Healthcare and Family 11 Services' allowable rates under the Illinois Public Aid 12 Code. Nothing in this subsection (a) precludes eligible 13 health care facilities hospitals from providing follow-up 14 healthcare and receiving reimbursement under this Section.

(b) Nothing in this Section precludes <u>an eligible health</u> <u>care facility</u> <u>a hospital</u>, health care provider, ambulance provider, laboratory, or pharmacy from billing the sexual assault survivor or any applicable health insurance or coverage for inpatient services.

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(c) (Blank).

(d) On and after July 1, 2012, the Department shall reduce any rate of reimbursement for services or other payments or alter any methodologies authorized by this Act or the Illinois Public Aid Code to reduce any rate of reimbursement for services or other payments in accordance with Section 5-5e of the Illinois Public Aid Code. (e) The Department of Healthcare and Family Services shall

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2 establish standards, rules, and regulations to implement this 3 Section.

4 (Source: P.A. 98-463, eff. 8-16-13; 99-454, eff. 1-1-16.)

5 (410 ILCS 70/7.5)

6 Sec. 7.5. Prohibition on billing sexual assault survivors 7 directly for certain services; written notice; billing 8 protocols.

9 (a) <u>An eligible health care facility</u> A hospital, health 10 care professional, ambulance provider, laboratory, or pharmacy 11 furnishing hospital emergency services, forensic services, 12 transportation, follow-up healthcare, or medication to a 13 sexual assault survivor shall not:

(1) charge or submit a bill for any portion of the
costs of the services, transportation, or medications to
the sexual assault survivor, including any insurance
deductible, co-pay, co-insurance, denial of claim by an
insurer, spenddown, or any other out-of-pocket expense;

(2) communicate with, harass, or intimidate the sexual
assault survivor for payment of services, including, but
not limited to, repeatedly calling or writing to the sexual
assault survivor and threatening to refer the matter to a
debt collection agency or to an attorney for collection,
enforcement, or filing of other process;

(3) refer a bill to a collection agency or attorney for

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collection action against the sexual assault survivor;

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(4) contact or distribute information to affect the sexual assault survivor's credit rating; or

4 (5) take any other action adverse to the sexual assault
5 survivor or his or her family on account of providing
6 services to the sexual assault survivor.

7 (b) Nothing in this Section precludes <u>an eliqible health</u> 8 <u>care facility</u> a hospital, health care provider, ambulance 9 provider, laboratory, or pharmacy from billing the sexual 10 assault survivor or any applicable health insurance or coverage 11 for inpatient services.

12 (c) Within 60 days after the effective date of this 13 amendatory Act of the 99th General Assembly, every <u>eligible</u> 14 <u>health care facility hospital</u> providing treatment services to 15 sexual assault survivors in accordance with a plan approved 16 under Section 2 of this Act shall provide a written notice to a 17 sexual assault survivor. The written notice must include, but 18 is not limited to, the following:

(1) a statement that the sexual assault survivor should
not be directly billed by any ambulance provider providing
transportation services, or by any <u>eligible health care</u>
<u>facility hospital</u>, health care professional, laboratory,
or pharmacy for the services the sexual assault survivor
received as an outpatient at the <u>eligible health care</u>
facility hospital;

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(2) a statement that a sexual assault survivor who is

admitted to a hospital may be billed for inpatient services
 provided by a hospital, health care professional,
 laboratory, or pharmacy;

4 (3) a statement that prior to leaving the emergency
5 department of the treating facility, the <u>eligible health</u>
6 <u>care facility hospital</u> will give the sexual assault
7 survivor a voucher for follow-up healthcare if the sexual
8 assault survivor is eligible to receive a voucher;

9 (4) the definition of "follow-up healthcare" as set
10 forth in Section 1a of this Act;

(5) a phone number the sexual assault survivor may call should the sexual assault survivor receive a bill from the <u>eligible health care facility</u> hospital for hospital emergency services and forensic services;

(6) the toll-free phone number of the Office of the Illinois Attorney General, Crime Victim Services Division, which the sexual assault survivor may call should the sexual assault survivor receive a bill from an ambulance provider, a health care professional, a laboratory, or a pharmacy.

This subsection (c) shall not apply to <u>eligible health care</u> <u>facilities</u> hospitals that provide transfer services as defined under Section 1a of this Act.

(d) Within 60 days after the effective date of this
amendatory Act of the 99th General Assembly, every health care
professional, except for those employed by <u>an eligible health</u>

care facility a hospital or hospital affiliate, as defined in 1 2 the Hospital Licensing Act, or those employed by a hospital 3 operated under the University of Illinois Hospital Act, who bills separately for hospital emergency services or forensic 4 5 services must develop a billing protocol that ensures that no survivor of sexual assault will be sent a bill for any hospital 6 7 emergency services or forensic services and submit the billing protocol to the Crime Victim Services Division of the Office of 8 9 the Attorney General for approval. Health care professionals 10 who bill as a legal entity may submit a single billing protocol 11 for the billing entity. The billing protocol must include at a 12 minimum:

(1) a description of training for persons who prepare bills for hospital emergency services and forensic services;

16 (2) a written acknowledgement signed by a person who
17 has completed the training that the person will not bill
18 survivors of sexual assault;

19 (3) prohibitions on submitting any bill for any portion 20 of hospital emergency services or forensic services 21 provided to a survivor of sexual assault to a collection 22 agency;

(4) prohibitions on taking any action that would
adversely affect the credit of the survivor of sexual
assault;

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(5) the termination of all collection activities if the

1 protocol is violated; and

2 (6) the actions to be taken if a bill is sent to a 3 collection agency or the failure to pay is reported to any 4 credit reporting agency.

5 The Crime Victim Services Division of the Office of the 6 Attorney General may provide a sample acceptable billing 7 protocol upon request.

8 The Office of the Attorney General shall approve a proposed 9 protocol if it finds that the implementation of the protocol 10 would result in no survivor of sexual assault being billed or 11 sent a bill for hospital emergency services or forensic 12 services.

13 If the Office of the Attorney General determines that 14 implementation of the protocol could result in the billing of a 15 survivor of sexual assault for hospital emergency services or 16 forensic services, the Office of the Attorney General shall 17 provide the health care professional with a written statement the deficiencies in the protocol. The health care 18 of professional shall have 30 days to submit a revised billing 19 20 protocol addressing the deficiencies to the Office of the Attorney General. The health care professional shall implement 21 22 the protocol upon approval by the Crime Victim Services 23 Division of the Office of the Attorney General.

The health care professional shall submit any proposed revision to or modification of an approved billing protocol to the Crime Victim Services Division of the Office of the Attorney General for approval. The health care professional shall implement the revised or modified billing protocol upon approval by the Crime Victim Services Division of the Office of the Illinois Attorney General.

5 (Source: P.A. 99-454, eff. 1-1-16.)

- 6 (410 ILCS 70/8) (from Ch. 111 1/2, par. 87-8)
- 7 Sec. 8. Penalties.

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8 (a) Any eligible health care facility hospital violating 9 any provisions of this Act other than Section 7.5 shall be 10 guilty of a petty offense for each violation, and any fine 11 imposed shall be paid into the general corporate funds of the 12 city, incorporated town or village in which the eligible health care facility hospital is located, or of the county, in case 13 such eligible health care facility hospital is outside the 14 15 limits of any incorporated municipality.

(b) The Attorney General may seek the assessment of one or more of the following civil monetary penalties in any action filed under this Act where the <u>eliqible health care facility</u> hospital, health care professional, ambulance provider, laboratory, or pharmacy knowingly violates Section 7.5 of the Act:

(1) For willful violations of paragraphs (1), (2), (4),
or (5) of subsection (a) of Section 7.5 or subsection (c)
of Section 7.5, the civil monetary penalty shall not exceed
\$500 per violation.

(2) For violations of paragraphs (1), (2), (4), or (5)1 2 of subsection (a) of Section 7.5 or subsection (c) of 3 Section 7.5 involving a pattern or practice, the civil monetary penalty shall not exceed \$500 per violation. 4 5 (3) For violations of paragraph (3) of subsection (a) of Section 7.5, the civil monetary penalty shall not exceed 6 7 \$500 for each day the bill is with a collection agency. 8 (4) For violations involving the failure to submit 9 billing protocols within the time period required under 10 subsection (d) of Section 7.5, the civil monetary penalty 11 shall not exceed \$100 per day until the health care 12 professional complies with subsection (d) of Section 7.5.

13 All civil monetary penalties shall be deposited into the 14 Violent Crime Victims Assistance Fund.

15 (Source: P.A. 99-454, eff. 1-1-16.)

16 (410 ILCS 70/9) (from Ch. 111 1/2, par. 87-9)

Sec. 9. Nothing in this Act shall be construed to require a <u>eligible health care facility hospital</u> to provide any services which relate to an abortion.

20 (Source: P.A. 79-564.)

21 Section 99. Effective date. This Act takes effect upon 22 becoming law.