



Rep. Kimberly Du Buclet

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10400HB3674ham001

LRB104 08255 SPS 23033 a

1 AMENDMENT TO HOUSE BILL 3674

2 AMENDMENT NO. \_\_\_\_\_. Amend House Bill 3674 by replacing  
3 everything after the enacting clause with the following:

4 "Section 5. The Illinois Health Facilities Planning Act is  
5 amended by changing Section 5.3 as follows:

6 (20 ILCS 3960/5.3)

7 (Section scheduled to be repealed on December 31, 2029)

8 Sec. 5.3. Annual report of capital expenditures.

9 (a) In addition to the State Board's authority to require  
10 reports, the State Board shall require each health care  
11 facility to submit an annual report of all capital  
12 expenditures in excess of \$200,000 (which shall be annually  
13 adjusted to reflect the increase in construction costs due to  
14 inflation) made by the health care facility during the most  
15 recent year. This annual report shall consist of a brief  
16 description of the capital expenditure, the amount and method

1 of financing the capital expenditure, the certificate of need  
2 project number if the project was reviewed, and the total  
3 amount of capital expenditures financially committed for the  
4 year. Data collected from health care facilities pursuant to  
5 this Section shall not duplicate or overlap other data  
6 collected by the Department and must be collected as part of  
7 the State Board's Annual Questionnaires or supplements for  
8 health care facilities that report these data.

9 (b) (1) For the purposes of this subsection (b) is ~~7~~

10 "Capital ~~capital~~ expenditures" means only expenditures  
11 required under subsection (a) for the erection, building,  
12 alteration, reconstruction, modernization, improvement,  
13 extension, or demolition of or by a hospital.

14 "Professional service expenditures" means expenses a  
15 hospital incurs in carrying out its administrative or general  
16 management functions, including, but not limited to,  
17 expenditures incurred by the hospital for contract information  
18 and data processing services, legal services, tax preparation  
19 services, and purchasing services. "Professional service  
20 expenditures" is not limited to the expenditures required to  
21 be reported under subsection (a).

22 (2) If a hospital under the University of Illinois  
23 Hospital Act or Hospital Licensing Act that has more than 100  
24 beds reports capital expenditures at or above the amount  
25 required under subsection (a), then the hospital shall also  
26 meet the reporting requirements under this subsection (b) for

1 female-owned, minority-owned, veteran-owned, and small  
2 business enterprises with respect to those reported capital  
3 expenditures and professional service expenditures.

4 (3) Each hospital shall include the following information  
5 in its annual report:

6 (A) The hospital's capital expenditure spending goals  
7 for female-owned, minority-owned, veteran-owned, and small  
8 business enterprises. These goals shall be expressed as a  
9 percentage of total capital expenditures reported by the  
10 hospital submitting the report.

11 (B) The hospital's actual capital expenditure spending  
12 for female-owned, minority-owned, veteran-owned, and small  
13 business enterprises. These actual expenditures shall be  
14 expressed as a percentage of total capital expenditures  
15 reported by the hospital submitting the report. The report  
16 may include actual spending on female-owned,  
17 minority-owned, veteran-owned, and small business  
18 enterprises that is less than the capital expenditure  
19 threshold required to be reported under subsection (a) of  
20 this Section.

21 (C) The hospital's spending goals for all professional  
22 service expenditures with female-owned, veteran-owned, and  
23 small business enterprises. These goals shall be expressed  
24 as a percentage of total professional service expenditures  
25 reported by the hospital submitting the report.

26 (D) The hospital's actual professional service

1       expenditures with female-owned, minority-owned,  
2       veteran-owned, and small business enterprises. These  
3       actual expenditures shall be expressed as a percentage of  
4       total professional service expenditures reported by the  
5       hospital submitting the report.

6       (E) ~~(C)~~ The type or types of capital expenditure or  
7       professional service expenditure for which the hospital  
8       shall be actively seeking supplier diversity in the next  
9       year.

10       (F) ~~(D)~~ An outline of the plan developed to alert and  
11       encourage female-owned, minority-owned, veteran-owned,  
12       and small business enterprises providing the type or types  
13       of services identified in subparagraph (E) ~~(C)~~ to seek  
14       business from the hospital.

15       (G) ~~(E)~~ An explanation of the challenges faced in  
16       finding quality vendors and any suggestions for what the  
17       Health Facilities and Services Review Board could do to be  
18       helpful to identify those vendors.

19       (H) ~~(F)~~ A list of the certifications the hospital  
20       recognizes.

21       (I) ~~(G)~~ The point of contact for any potential vendor  
22       who wishes to do business with the hospital and an  
23       explanation of the process for a vendor to enroll with the  
24       hospital as a female-owned, minority-owned, veteran-owned,  
25       or small business enterprise.

26       (J) ~~(H)~~ Any particular success stories to encourage

1       other hospitals to emulate best practices.

2       (4) A health care system may develop a system-wide annual  
3       report that includes all hospitals in order to comply with the  
4       requirements of this subsection (b). Each annual report shall  
5       include as much State-specific data as possible. If the  
6       submitting entity does not submit State-specific data, then  
7       the hospital shall include any national data it does have and  
8       explain why it could not submit State-specific data and how it  
9       intends to do so in future reports, if possible.

10       (5) Subject to appropriation, the Department of Central  
11       Management Services shall hold an annual workshop open to the  
12       public in 2017 and every year thereafter on the state of  
13       supplier diversity to collaboratively seek solutions to  
14       structural impediments to achieving stated goals, including  
15       testimony from subject matter experts.

16       (6) The Health Facilities and Services Review Board shall  
17       publish a database on its website of the point of contact for  
18       each hospital for supplier diversity, along with a list of  
19       certifications each hospital recognizes from the information  
20       submitted in each annual report. The Health Facilities and  
21       Services Review Board shall publish each annual report on its  
22       website and shall maintain each annual report for at least 5  
23       years.

24       (7) Notwithstanding any other provision of law, the Health  
25       Facilities and Services Review Board shall not inquire about,  
26       review, obtain, or in any other way consider the information

1 provided in this Section when reviewing an application for a  
2 permit or exemption or in taking any other action under this  
3 Act.

4 (8) The annual report required under this subsection (b)  
5 shall be submitted by each hospital for its fiscal years that  
6 begin at least 6 months after the effective date of this  
7 amendatory Act of the 99th General Assembly.

8 (9) The information required to be submitted under  
9 subparagraphs (C) and (D) of paragraph (3) shall be submitted  
10 by each hospital for fiscal year 2026 and every fiscal year  
11 there after.

12 (Source: P.A. 99-767, eff. 8-12-16; 100-681, eff. 8-3-18.)".