



Rep. Kathleen Willis

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1 AMENDMENT TO SENATE BILL 1739

2 AMENDMENT NO. \_\_\_\_\_. Amend Senate Bill 1739 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 Sections 6, 8.5, 12, and 12.2 and by adding  
6 Section 8.7 as follows:

7 (20 ILCS 3960/6) (from Ch. 111 1/2, par. 1156)

8 (Section scheduled to be repealed on December 31, 2029)

9 Sec. 6. Application for permit or exemption; exemption  
10 regulations.

11 (a) An application for a permit or exemption shall be made  
12 to the State Board upon forms provided by the State Board. This  
13 application shall contain such information as the State Board  
14 deems necessary. The State Board shall not require an applicant  
15 to file a Letter of Intent before an application is filed. Such  
16 application shall include affirmative evidence on which the

1 State Board or Chairman may make its decision on the approval  
2 or denial of the permit or exemption.

3 (b) The State Board shall establish by regulation the  
4 procedures and requirements regarding issuance of exemptions.  
5 An exemption shall be approved when information required by the  
6 Board by rule is submitted. Projects eligible for an exemption,  
7 rather than a permit, include, but are not limited to, change  
8 of ownership of a health care facility, ~~discontinuation of a~~  
9 ~~category of service, and discontinuation of a health care~~  
10 ~~facility,~~ other than a health care facility maintained by the  
11 State or any agency or department thereof or a nursing home  
12 maintained by a county. The Board may accept an application for  
13 an exemption for the discontinuation of a category of service  
14 at a health care facility only once in a 12-month period  
15 following (1) the previous application for exemption at the  
16 same health care facility or (2) the final decision of the  
17 Board regarding the discontinuation of a category service at  
18 the same health care facility, whichever occurs later. A  
19 discontinuation of a category of service shall otherwise  
20 require an application for a permit if an application for an  
21 exemption has already been accepted within the 12-month period.  
22 For a change of ownership among related persons of a health  
23 care facility, the State Board shall provide by rule for an  
24 expedited process for obtaining an exemption ~~in accordance with~~  
25 ~~Section 8.5 of this Act.~~ For the purposes of this Section,  
26 "change of ownership among related persons" means a transaction

1 in which the parties to the transaction are under common  
2 control or ownership before and after the transaction is  
3 complete.

4 (c) All applications shall be signed by the applicant and  
5 shall be verified by any 2 officers thereof.

6 (c-5) Any written review or findings of the Board staff set  
7 forth in the State Board Staff Report concerning an application  
8 for a permit must be made available to the public and the  
9 applicant at least 14 calendar days before the meeting of the  
10 State Board at which the review or findings are considered. The  
11 applicant and members of the public may submit, to the State  
12 Board, written responses regarding the facts set forth in the  
13 review or findings of the Board staff. Members of the public  
14 and the applicant shall have until 10 days before the meeting  
15 of the State Board to submit any written response concerning  
16 the Board staff's written review or findings. The Board staff  
17 may revise any findings to address corrections of factual  
18 errors cited in the public response. At the meeting, the State  
19 Board may, in its discretion, permit the submission of other  
20 additional written materials.

21 (d) Upon receipt of an application for a permit, the State  
22 Board shall approve and authorize the issuance of a permit if  
23 it finds (1) that the applicant is fit, willing, and able to  
24 provide a proper standard of health care service for the  
25 community with particular regard to the qualification,  
26 background and character of the applicant, (2) that economic

1 feasibility is demonstrated in terms of effect on the existing  
2 and projected operating budget of the applicant and of the  
3 health care facility; in terms of the applicant's ability to  
4 establish and operate such facility in accordance with  
5 licensure regulations promulgated under pertinent state laws;  
6 and in terms of the projected impact on the total health care  
7 expenditures in the facility and community, (3) that safeguards  
8 are provided that assure that the establishment, construction  
9 or modification of the health care facility or acquisition of  
10 major medical equipment is consistent with the public interest,  
11 and (4) that the proposed project is consistent with the  
12 orderly and economic development of such facilities and  
13 equipment and is in accord with standards, criteria, or plans  
14 of need adopted and approved pursuant to the provisions of  
15 Section 12 of this Act.

16 (Source: P.A. 99-154, eff. 7-28-15; 100-518, eff. 6-1-18;  
17 100-681, eff. 8-3-18.)

18 (20 ILCS 3960/8.5)

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

20 Sec. 8.5. Certificate of exemption for change of ownership  
21 of a health care facility; ~~discontinuation of a health care~~  
22 ~~facility or category of service;~~ public notice and public  
23 hearing.

24 (a) Upon a finding that an application for a change of  
25 ownership is complete, the State Board shall publish a legal

1 notice on 3 consecutive days ~~one day~~ in a newspaper of general  
2 circulation in the area or community to be affected and afford  
3 the public an opportunity to request a hearing. If the  
4 application is for a facility located in a Metropolitan  
5 Statistical Area, an additional legal notice shall be published  
6 in a newspaper of limited circulation, if one exists, in the  
7 area in which the facility is located. If the newspaper of  
8 limited circulation is published on a daily basis, the  
9 additional legal notice shall be published on 3 consecutive  
10 days ~~one day~~. The applicant shall pay the cost incurred by the  
11 Board in publishing the change of ownership notice in  
12 newspapers as required under this subsection. The legal notice  
13 shall also be posted on the Health Facilities and Services  
14 Review Board's web site and sent to the State Representative  
15 and State Senator of the district in which the health care  
16 facility is located. An application for change of ownership of  
17 a hospital shall not be deemed complete without a signed  
18 certification that for a period of 2 years after the change of  
19 ownership transaction is effective, the hospital will not adopt  
20 a charity care policy that is more restrictive than the policy  
21 in effect during the year prior to the transaction. An  
22 application for a change of ownership need not contain signed  
23 transaction documents so long as it includes the following key  
24 terms of the transaction: names and background of the parties;  
25 structure of the transaction; the person who will be the  
26 licensed or certified entity after the transaction; the

1 ownership or membership interests in such licensed or certified  
2 entity both prior to and after the transaction; fair market  
3 value of assets to be transferred; and the purchase price or  
4 other form of consideration to be provided for those assets.  
5 The issuance of the certificate of exemption shall be  
6 contingent upon the applicant submitting a statement to the  
7 Board within 90 days after the closing date of the transaction,  
8 or such longer period as provided by the Board, certifying that  
9 the change of ownership has been completed in accordance with  
10 the key terms contained in the application. If such key terms  
11 of the transaction change, a new application shall be required.

12 Where a change of ownership is among related persons, and  
13 there are no other changes being proposed at the health care  
14 facility that would otherwise require a permit or exemption  
15 under this Act, the applicant shall submit an application  
16 consisting of a standard notice in a form set forth by the  
17 Board briefly explaining the reasons for the proposed change of  
18 ownership. Once such an application is submitted to the Board  
19 and reviewed by the Board staff, the Board Chair shall take  
20 action on an application for an exemption for a change of  
21 ownership among related persons within 45 days after the  
22 application has been deemed complete, provided the application  
23 meets the applicable standards under this Section. If the Board  
24 Chair has a conflict of interest or for other good cause, the  
25 Chair may request review by the Board. Notwithstanding any  
26 other provision of this Act, for purposes of this Section, a

1 change of ownership among related persons means a transaction  
2 where the parties to the transaction are under common control  
3 or ownership before and after the transaction is completed.

4 ~~Nothing in this Act shall be construed as authorizing the~~  
5 ~~Board to impose any conditions, obligations, or limitations,~~  
6 ~~other than those required by this Section, with respect to the~~  
7 ~~issuance of an exemption for a change of ownership, including,~~  
8 ~~but not limited to, the time period before which a subsequent~~  
9 ~~change of ownership of the health care facility could be~~  
10 ~~sought, or the commitment to continue to offer for a specified~~  
11 ~~time period any services currently offered by the health care~~  
12 ~~facility.~~

13 (a-3) (Blank). ~~Upon a finding that an application to close~~  
14 ~~a health care facility is complete, the State Board shall~~  
15 ~~publish a legal notice on 3 consecutive days in a newspaper of~~  
16 ~~general circulation in the area or community to be affected and~~  
17 ~~afford the public an opportunity to request a hearing. If the~~  
18 ~~application is for a facility located in a Metropolitan~~  
19 ~~Statistical Area, an additional legal notice shall be published~~  
20 ~~in a newspaper of limited circulation, if one exists, in the~~  
21 ~~area in which the facility is located. If the newspaper of~~  
22 ~~limited circulation is published on a daily basis, the~~  
23 ~~additional legal notice shall be published on 3 consecutive~~  
24 ~~days. The legal notice shall also be posted on the Health~~  
25 ~~Facilities and Services Review Board's web site and sent to the~~  
26 ~~State Representative and State Senator of the district in which~~

1 ~~the health care facility is located. In addition, the health~~  
2 ~~care facility shall provide notice of closure to the local~~  
3 ~~media that the health care facility would routinely notify~~  
4 ~~about facility events. No later than 90 days after a~~  
5 ~~discontinuation of a health facility, the applicant must submit~~  
6 ~~a statement to the State Board certifying that the~~  
7 ~~discontinuation is complete.~~

8 (a-5) (Blank). ~~Upon a finding that an application to~~  
9 ~~discontinue a category of service is complete and provides the~~  
10 ~~requested information, as specified by the State Board, an~~  
11 ~~exemption shall be issued. No later than 30 days after the~~  
12 ~~issuance of the exemption, the health care facility must give~~  
13 ~~written notice of the discontinuation of the category of~~  
14 ~~service to the State Senator and State Representative serving~~  
15 ~~the legislative district in which the health care facility is~~  
16 ~~located. No later than 90 days after a discontinuation of a~~  
17 ~~category of service, the applicant must submit a statement to~~  
18 ~~the State Board certifying that the discontinuation is~~  
19 ~~complete.~~

20 (b) If a public hearing is requested, it shall be held at  
21 least 15 days but no more than 30 days after the date of  
22 publication of the legal notice in the community in which the  
23 facility is located. The hearing shall be held in the affected  
24 area or community in a place of reasonable size and  
25 accessibility and a full and complete written transcript of the  
26 proceedings shall be made. All interested persons attending the



1 hearing shall be given a reasonable opportunity to present  
2 their positions in writing or orally. The applicant shall  
3 provide a summary or describe the proposed change of ownership  
4 ~~of the proposal for distribution~~ at the public hearing.

5 (c) For the purposes of this Section "newspaper of limited  
6 circulation" means a newspaper intended to serve a particular  
7 or defined population of a specific geographic area within a  
8 Metropolitan Statistical Area such as a municipality, town,  
9 village, township, or community area, but does not include  
10 publications of professional and trade associations.

11 (d) The changes made to this Section by this amendatory Act  
12 of the 101st General Assembly shall apply to all applications  
13 submitted after the effective date of this amendatory Act of  
14 the 101st General Assembly.

15 (Source: P.A. 99-154, eff. 7-28-15; 99-527, eff. 1-1-17;  
16 99-551, eff. 7-15-16; 100-201, eff. 8-18-17.)

17 (20 ILCS 3960/8.7 new)

18 Sec. 8.7. Application for permit for discontinuation of a  
19 health care facility or category of service; public notice and  
20 public hearing.

21 (a) Upon a finding that an application to close a health  
22 care facility or discontinue a category of service is complete,  
23 the State Board shall publish a legal notice on 3 consecutive  
24 days in a newspaper of general circulation in the area or  
25 community to be affected and afford the public an opportunity

1 to request a hearing. If the application is for a facility  
2 located in a Metropolitan Statistical Area, an additional legal  
3 notice shall be published in a newspaper of limited  
4 circulation, if one exists, in the area in which the facility  
5 is located. If the newspaper of limited circulation is  
6 published on a daily basis, the additional legal notice shall  
7 be published on 3 consecutive days. The legal notice shall also  
8 be posted on the Health Facilities and Services Review Board's  
9 website and sent to the State Representative and State Senator  
10 of the district in which the health care facility is located.  
11 In addition, the health care facility shall provide notice of  
12 closure to the local media that the health care facility would  
13 routinely notify about facility events.

14 (b) No later than 30 days after issuance of a permit to  
15 close a health care facility or discontinue a category of  
16 service, the permit holder shall give written notice of the  
17 closure or discontinuation to the State Senator and State  
18 Representative serving the legislative district in which the  
19 health care facility is located.

20 (c) If there is a pending lawsuit concerning the closure of  
21 a health care facility or the discontinuation of a category of  
22 service at a health care facility for which an application for  
23 a permit is under review, the Board may defer any pending  
24 action involving that application until the resolution of the  
25 lawsuit.

26 (d) The changes made to this Section by this amendatory Act

1 of the 101st General Assembly shall apply to all applications  
2 submitted after the effective date of this amendatory Act of  
3 the 101st General Assembly.

4 (20 ILCS 3960/12) (from Ch. 111 1/2, par. 1162)

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

6 Sec. 12. Powers and duties of State Board. For purposes of  
7 this Act, the State Board shall exercise the following powers  
8 and duties:

9 (1) Prescribe rules, regulations, standards, criteria,  
10 procedures or reviews which may vary according to the purpose  
11 for which a particular review is being conducted or the type of  
12 project reviewed and which are required to carry out the  
13 provisions and purposes of this Act. Policies and procedures of  
14 the State Board shall take into consideration the priorities  
15 and needs of medically underserved areas and other health care  
16 services, giving special consideration to the impact of  
17 projects on access to safety net services.

18 (2) Adopt procedures for public notice and hearing on all  
19 proposed rules, regulations, standards, criteria, and plans  
20 required to carry out the provisions of this Act.

21 (3) (Blank).

22 (4) Develop criteria and standards for health care  
23 facilities planning, conduct statewide inventories of health  
24 care facilities, maintain an updated inventory on the Board's  
25 web site reflecting the most recent bed and service changes and

1 updated need determinations when new census data become  
2 available or new need formulae are adopted, and develop health  
3 care facility plans which shall be utilized in the review of  
4 applications for permit under this Act. Such health facility  
5 plans shall be coordinated by the Board with pertinent State  
6 Plans. Inventories pursuant to this Section of skilled or  
7 intermediate care facilities licensed under the Nursing Home  
8 Care Act, skilled or intermediate care facilities licensed  
9 under the ID/DD Community Care Act, skilled or intermediate  
10 care facilities licensed under the MC/DD Act, facilities  
11 licensed under the Specialized Mental Health Rehabilitation  
12 Act of 2013, or nursing homes licensed under the Hospital  
13 Licensing Act shall be conducted on an annual basis no later  
14 than July 1 of each year and shall include among the  
15 information requested a list of all services provided by a  
16 facility to its residents and to the community at large and  
17 differentiate between active and inactive beds.

18 In developing health care facility plans, the State Board  
19 shall consider, but shall not be limited to, the following:

20 (a) The size, composition and growth of the population  
21 of the area to be served;

22 (b) The number of existing and planned facilities  
23 offering similar programs;

24 (c) The extent of utilization of existing facilities;

25 (d) The availability of facilities which may serve as  
26 alternatives or substitutes;

1           (e) The availability of personnel necessary to the  
2 operation of the facility;

3           (f) Multi-institutional planning and the establishment  
4 of multi-institutional systems where feasible;

5           (g) The financial and economic feasibility of proposed  
6 construction or modification; and

7           (h) In the case of health care facilities established  
8 by a religious body or denomination, the needs of the  
9 members of such religious body or denomination may be  
10 considered to be public need.

11           The health care facility plans which are developed and  
12 adopted in accordance with this Section shall form the basis  
13 for the plan of the State to deal most effectively with  
14 statewide health needs in regard to health care facilities.

15           (5) Coordinate with other state agencies having  
16 responsibilities affecting health care facilities, including  
17 those of licensure and cost reporting.

18           (6) Solicit, accept, hold and administer on behalf of the  
19 State any grants or bequests of money, securities or property  
20 for use by the State Board in the administration of this Act;  
21 and enter into contracts consistent with the appropriations for  
22 purposes enumerated in this Act.

23           (7) (Blank).

24           (8) Prescribe rules, regulations, standards, and criteria  
25 for the conduct of an expeditious review of applications for  
26 permits for projects of construction or modification of a

1 health care facility, which projects are classified as  
2 emergency, substantive, or non-substantive in nature.

3 Substantive projects shall include no more than the  
4 following:

5 (a) Projects to construct (1) a new or replacement  
6 facility located on a new site or (2) a replacement  
7 facility located on the same site as the original facility  
8 and the cost of the replacement facility exceeds the  
9 capital expenditure minimum, which shall be reviewed by the  
10 Board within 120 days;

11 (b) Projects proposing a (1) new service within an  
12 existing healthcare facility or (2) discontinuation of a  
13 service within an existing healthcare facility, which  
14 shall be reviewed by the Board within 60 days; or

15 (c) Projects proposing a change in the bed capacity of  
16 a health care facility by an increase in the total number  
17 of beds or by a redistribution of beds among various  
18 categories of service or by a relocation of beds from one  
19 physical facility or site to another by more than 20 beds  
20 or more than 10% of total bed capacity, as defined by the  
21 State Board, whichever is less, over a 2-year period.

22 The Chairman may approve applications for exemption that  
23 meet the criteria set forth in rules or refer them to the full  
24 Board. The Chairman may approve any unopposed application that  
25 meets all of the review criteria or refer them to the full  
26 Board.

1           Such rules shall not prevent the conduct of a public  
2 hearing upon the timely request of an interested party. Such  
3 reviews shall not exceed 60 days from the date the application  
4 is declared to be complete.

5           (9) Prescribe rules, regulations, standards, and criteria  
6 pertaining to the granting of permits for construction and  
7 modifications which are emergent in nature and must be  
8 undertaken immediately to prevent or correct structural  
9 deficiencies or hazardous conditions that may harm or injure  
10 persons using the facility, as defined in the rules and  
11 regulations of the State Board. This procedure is exempt from  
12 public hearing requirements of this Act.

13           (10) Prescribe rules, regulations, standards and criteria  
14 for the conduct of an expeditious review, not exceeding 60  
15 days, of applications for permits for projects to construct or  
16 modify health care facilities which are needed for the care and  
17 treatment of persons who have acquired immunodeficiency  
18 syndrome (AIDS) or related conditions.

19           (10.5) Provide its rationale when voting on an item before  
20 it at a State Board meeting in order to comply with subsection  
21 (b) of Section 3-108 of the Code of Civil Procedure.

22           (11) Issue written decisions upon request of the applicant  
23 or an adversely affected party to the Board. Requests for a  
24 written decision shall be made within 15 days after the Board  
25 meeting in which a final decision has been made. A "final  
26 decision" for purposes of this Act is the decision to approve

1 or deny an application, or take other actions permitted under  
2 this Act, at the time and date of the meeting that such action  
3 is scheduled by the Board. The transcript of the State Board  
4 meeting shall be incorporated into the Board's final decision.  
5 The staff of the Board shall prepare a written copy of the  
6 final decision and the Board shall approve a final copy for  
7 inclusion in the formal record. The Board shall consider, for  
8 approval, the written draft of the final decision no later than  
9 the next scheduled Board meeting. The written decision shall  
10 identify the applicable criteria and factors listed in this Act  
11 and the Board's regulations that were taken into consideration  
12 by the Board when coming to a final decision. If the Board  
13 denies or fails to approve an application for permit or  
14 exemption, the Board shall include in the final decision a  
15 detailed explanation as to why the application was denied and  
16 identify what specific criteria or standards the applicant did  
17 not fulfill.

18 (12) (Blank).

19 (13) Provide a mechanism for the public to comment on, and  
20 request changes to, draft rules and standards.

21 (14) Implement public information campaigns to regularly  
22 inform the general public about the opportunity for public  
23 hearings and public hearing procedures.

24 (15) Establish a separate set of rules and guidelines for  
25 long-term care that recognizes that nursing homes are a  
26 different business line and service model from other regulated



1 facilities. An open and transparent process shall be developed  
2 that considers the following: how skilled nursing fits in the  
3 continuum of care with other care providers, modernization of  
4 nursing homes, establishment of more private rooms,  
5 development of alternative services, and current trends in  
6 long-term care services. The Chairman of the Board shall  
7 appoint a permanent Health Services Review Board Long-term Care  
8 Facility Advisory Subcommittee that shall develop and  
9 recommend to the Board the rules to be established by the Board  
10 under this paragraph (15). The Subcommittee shall also provide  
11 continuous review and commentary on policies and procedures  
12 relative to long-term care and the review of related projects.  
13 The Subcommittee shall make recommendations to the Board no  
14 later than January 1, 2016 and every January thereafter  
15 pursuant to the Subcommittee's responsibility for the  
16 continuous review and commentary on policies and procedures  
17 relative to long-term care. In consultation with other experts  
18 from the health field of long-term care, the Board and the  
19 Subcommittee shall study new approaches to the current bed need  
20 formula and Health Service Area boundaries to encourage  
21 flexibility and innovation in design models reflective of the  
22 changing long-term care marketplace and consumer preferences  
23 and submit its recommendations to the Chairman of the Board no  
24 later than January 1, 2017. The Subcommittee shall evaluate,  
25 and make recommendations to the State Board regarding, the  
26 buying, selling, and exchange of beds between long-term care

1 facilities within a specified geographic area or drive time.  
2 The Board shall file the proposed related administrative rules  
3 for the separate rules and guidelines for long-term care  
4 required by this paragraph (15) by no later than September 30,  
5 2011. The Subcommittee shall be provided a reasonable and  
6 timely opportunity to review and comment on any review,  
7 revision, or updating of the criteria, standards, procedures,  
8 and rules used to evaluate project applications as provided  
9 under Section 12.3 of this Act.

10 The Chairman of the Board shall appoint voting members of  
11 the Subcommittee, who shall serve for a period of 3 years, with  
12 one-third of the terms expiring each January, to be determined  
13 by lot. Appointees shall include, but not be limited to,  
14 recommendations from each of the 3 statewide long-term care  
15 associations, with an equal number to be appointed from each.  
16 Compliance with this provision shall be through the appointment  
17 and reappointment process. All appointees serving as of April  
18 1, 2015 shall serve to the end of their term as determined by  
19 lot or until the appointee voluntarily resigns, whichever is  
20 earlier.

21 One representative from the Department of Public Health,  
22 the Department of Healthcare and Family Services, the  
23 Department on Aging, and the Department of Human Services may  
24 each serve as an ex-officio non-voting member of the  
25 Subcommittee. The Chairman of the Board shall select a  
26 Subcommittee Chair, who shall serve for a period of 3 years.

1           (16) Prescribe the format of the State Board Staff Report.  
2 A State Board Staff Report shall pertain to applications that  
3 include, but are not limited to, applications for permit or  
4 exemption, applications for permit renewal, applications for  
5 extension of the financial commitment period, applications  
6 requesting a declaratory ruling, or applications under the  
7 Health Care Worker Self-Referral Act. State Board Staff Reports  
8 shall compare applications to the relevant review criteria  
9 under the Board's rules.

10           (17) Establish a separate set of rules and guidelines for  
11 facilities licensed under the Specialized Mental Health  
12 Rehabilitation Act of 2013. An application for the  
13 re-establishment of a facility in connection with the  
14 relocation of the facility shall not be granted unless the  
15 applicant has a contractual relationship with at least one  
16 hospital to provide emergency and inpatient mental health  
17 services required by facility consumers, and at least one  
18 community mental health agency to provide oversight and  
19 assistance to facility consumers while living in the facility,  
20 and appropriate services, including case management, to assist  
21 them to prepare for discharge and reside stably in the  
22 community thereafter. No new facilities licensed under the  
23 Specialized Mental Health Rehabilitation Act of 2013 shall be  
24 established after June 16, 2014 (the effective date of Public  
25 Act 98-651) except in connection with the relocation of an  
26 existing facility to a new location. An application for a new

1 location shall not be approved unless there are adequate  
2 community services accessible to the consumers within a  
3 reasonable distance, or by use of public transportation, so as  
4 to facilitate the goal of achieving maximum individual  
5 self-care and independence. At no time shall the total number  
6 of authorized beds under this Act in facilities licensed under  
7 the Specialized Mental Health Rehabilitation Act of 2013 exceed  
8 the number of authorized beds on June 16, 2014 (the effective  
9 date of Public Act 98-651).

10 (18) Elect a Vice Chairman to preside over State Board  
11 meetings and otherwise act in place of the Chairman when the  
12 Chairman is unavailable.

13 (Source: P.A. 99-78, eff. 7-20-15; 99-114, eff. 7-23-15;  
14 99-180, eff. 7-29-15; 99-277, eff. 8-5-15; 99-527, eff. 1-1-17;  
15 99-642, eff. 7-28-16; 100-518, eff. 6-1-18; 100-681, eff.  
16 8-3-18.)

17 (20 ILCS 3960/12.2)

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

19 Sec. 12.2. Powers of the State Board staff. For purposes of  
20 this Act, the staff shall exercise the following powers and  
21 duties:

22 (1) Review applications for permits and exemptions in  
23 accordance with the standards, criteria, and plans of need  
24 established by the State Board under this Act and certify  
25 its finding to the State Board.

1           (1.5) Post the following on the Board's web site:  
2 relevant (i) rules, (ii) standards, (iii) criteria, (iv)  
3 State norms, (v) references used by Board staff in making  
4 determinations about whether application criteria are met,  
5 and (vi) notices of project-related filings, including  
6 notice of public comments related to the application.

7           (2) Charge and collect an amount determined by the  
8 State Board and the staff to be reasonable fees for the  
9 processing of applications by the State Board. The State  
10 Board shall set the amounts by rule. Application fees for  
11 continuing care retirement communities, and other health  
12 care models that include regulated and unregulated  
13 components, shall apply only to those components subject to  
14 regulation under this Act. All fees and fines collected  
15 under the provisions of this Act shall be deposited into  
16 the Illinois Health Facilities Planning Fund to be used for  
17 the expenses of administering this Act.

18           (2.1) Publish the following reports on the State Board  
19 website:

20           (A) An annual accounting, aggregated by category  
21 and with names of parties redacted, of fees, fines, and  
22 other revenue collected as well as expenses incurred,  
23 in the administration of this Act.

24           (B) An annual report, with names of the parties  
25 redacted, that summarizes all settlement agreements  
26 entered into with the State Board that resolve an

1           alleged instance of noncompliance with State Board  
2           requirements under this Act.

3           (C) (Blank).

4           (D) Board reports showing the degree to which an  
5           application conforms to the review standards, a  
6           summation of relevant public testimony, and any  
7           additional information that staff wants to  
8           communicate.

9           (3) Coordinate with other State agencies having  
10          responsibilities affecting health care facilities,  
11          including licensure and cost reporting agencies.

12          (4) Issue advisory opinions upon request. Staff  
13          advisory opinions do not constitute determinations by the  
14          State Board. Determinations by the State Board are made  
15          through the declaratory ruling process.

16          (Source: P.A. 99-527, eff. 1-1-17; 100-681, eff. 8-3-18.)

17          Section 99. Effective date. This Act takes effect upon  
18          becoming law."