



Sen. Rachelle Crowe

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10200SB0970sam002

LRB102 04884 CPF 37774 a

1 AMENDMENT TO SENATE BILL 970

2 AMENDMENT NO. \_\_\_\_\_. Amend Senate Bill 970 by replacing  
3 everything after the enacting clause with the following:

4 "Section 5. The Sexual Assault Survivors Emergency  
5 Treatment Act is amended by changing Sections 1a, 1a-1, 2,  
6 2-1, 2.1, 2.1-1, 5, 5-1, and 5.4 and by adding Section 1b as  
7 follows:

8 (410 ILCS 70/1a) (from Ch. 111 1/2, par. 87-1a)

9 Sec. 1a. Definitions.

10 (a) In this Act:

11 "Advanced practice registered nurse" has the meaning  
12 provided in Section 50-10 of the Nurse Practice Act.

13 "Ambulance provider" means an individual or entity that  
14 owns and operates a business or service using ambulances or  
15 emergency medical services vehicles to transport emergency  
16 patients.

1 "Approved pediatric health care facility" means a health  
2 care facility, other than a hospital, with a sexual assault  
3 treatment plan approved by the Department to provide medical  
4 forensic services to: (A) pediatric sexual assault survivors  
5 who present with a complaint of sexual assault within a  
6 minimum of 96 hours ~~the last 7 days~~ or who have disclosed past  
7 sexual assault by a specific individual and were in the care of  
8 that individual within a minimum of 96 hours; and (B) sexual  
9 assault survivors at least 13 years of age but under 18 years  
10 of age who present with a complaint of sexual assault within a  
11 minimum of the last 7 days or who have disclosed past sexual  
12 assault by a specific individual and were in the care of that  
13 individual within a minimum of the last 7 days.

14 "Areawide sexual assault treatment plan" means a plan,  
15 developed by hospitals or by hospitals and approved pediatric  
16 health care facilities in a community or area to be served,  
17 which provides for medical forensic services to sexual assault  
18 survivors that shall be made available by each of the  
19 participating hospitals and approved pediatric health care  
20 facilities.

21 "Board-certified child abuse pediatrician" means a  
22 physician certified by the American Board of Pediatrics in  
23 child abuse pediatrics.

24 "Board-eligible child abuse pediatrician" means a  
25 physician who has completed the requirements set forth by the  
26 American Board of Pediatrics to take the examination for

1 certification in child abuse pediatrics.

2 "Department" means the Department of Public Health.

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

7 "Follow-up healthcare" means healthcare services related  
8 to a sexual assault, including laboratory services and  
9 pharmacy services, rendered within 90 days of the initial  
10 visit for medical forensic services.

11 "Health care professional" means a physician, a physician  
12 assistant, a sexual assault forensic examiner, an advanced  
13 practice registered nurse, a registered professional nurse, a  
14 licensed practical nurse, or a sexual assault nurse examiner.

15 "Hospital" means a hospital licensed under the Hospital  
16 Licensing Act or operated under the University of Illinois  
17 Hospital Act, any outpatient center included in the hospital's  
18 sexual assault treatment plan where hospital employees provide  
19 medical forensic services, and an out-of-state hospital that  
20 has consented to the jurisdiction of the Department under  
21 Section 2.06.

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

1 Collection Kit.

2 "Law enforcement agency having jurisdiction" means the law  
3 enforcement agency in the jurisdiction where an alleged sexual  
4 assault or sexual abuse occurred.

5 "Licensed practical nurse" has the meaning provided in  
6 Section 50-10 of the Nurse Practice Act.

7 "Medical forensic services" means health care delivered to  
8 patients within or under the care and supervision of personnel  
9 working in a designated emergency department of a hospital or  
10 an approved pediatric health care facility. "Medical forensic  
11 services" includes, but is not limited to, taking a medical  
12 history, performing photo documentation, performing a physical  
13 and anogenital examination, assessing the patient for evidence  
14 collection, collecting evidence in accordance with a statewide  
15 sexual assault evidence collection program administered by the  
16 Illinois State Police using the Illinois State Police Sexual  
17 Assault Evidence Collection Kit, if appropriate, assessing the  
18 patient for drug-facilitated or alcohol-facilitated sexual  
19 assault, providing an evaluation of and care for sexually  
20 transmitted infection and human immunodeficiency virus (HIV),  
21 pregnancy risk evaluation and care, and discharge and  
22 follow-up healthcare planning.

23 "Pediatric health care facility" means a clinic or  
24 physician's office that provides medical services to patients  
25 under the age of 18 ~~pediatric patients~~.

26 "Pediatric sexual assault survivor" means a person under

1 the age of 13 who presents for medical forensic services in  
2 relation to injuries or trauma resulting from a sexual  
3 assault.

4 "Photo documentation" means digital photographs or  
5 colposcope videos stored and backed up securely in the  
6 original file format.

7 "Physician" means a person licensed to practice medicine  
8 in all its branches.

9 "Physician assistant" has the meaning provided in Section  
10 4 of the Physician Assistant Practice Act of 1987.

11 "Prepubescent sexual assault survivor" means a female who  
12 is under the age of 18 years and has not had a first menstrual  
13 cycle or a male who is under the age of 18 years and has not  
14 started to develop secondary sex characteristics who presents  
15 for medical forensic services in relation to injuries or  
16 trauma resulting from a sexual assault.

17 "Qualified medical provider" means a board-certified child  
18 abuse pediatrician, board-eligible child abuse pediatrician, a  
19 sexual assault forensic examiner, or a sexual assault nurse  
20 examiner who has access to photo documentation tools, and who  
21 participates in peer review.

22 "Registered Professional Nurse" has the meaning provided  
23 in Section 50-10 of the Nurse Practice Act.

24 "Sexual assault" means:

25 (1) an act of sexual conduct; as used in this  
26 paragraph, "sexual conduct" has the meaning provided under

1 Section 11-0.1 of the Criminal Code of 2012; or

2 (2) any act of sexual penetration; as used in this  
3 paragraph, "sexual penetration" has the meaning provided  
4 under Section 11-0.1 of the Criminal Code of 2012 and  
5 includes, without limitation, acts prohibited under  
6 Sections 11-1.20 through 11-1.60 of the Criminal Code of  
7 2012.

8 "Sexual assault forensic examiner" means a physician or  
9 physician assistant who has completed training that meets or  
10 is substantially similar to the Sexual Assault Nurse Examiner  
11 Education Guidelines established by the International  
12 Association of Forensic Nurses.

13 "Sexual assault nurse examiner" means an advanced practice  
14 registered nurse or registered professional nurse who has  
15 completed a sexual assault nurse examiner training program  
16 that meets the Sexual Assault Nurse Examiner Education  
17 Guidelines established by the International Association of  
18 Forensic Nurses.

19 "Sexual assault services voucher" means a document  
20 generated by a hospital or approved pediatric health care  
21 facility at the time the sexual assault survivor receives  
22 outpatient medical forensic services that may be used to seek  
23 payment for any ambulance services, medical forensic services,  
24 laboratory services, pharmacy services, and follow-up  
25 healthcare provided as a result of the sexual assault.

26 "Sexual assault survivor" means a person who presents for

1 medical forensic services in relation to injuries or trauma  
2 resulting from a sexual assault.

3 "Sexual assault transfer plan" means a written plan  
4 developed by a hospital and approved by the Department, which  
5 describes the hospital's procedures for transferring sexual  
6 assault survivors to another hospital, and an approved  
7 pediatric health care facility, if applicable, in order to  
8 receive medical forensic services.

9 "Sexual assault treatment plan" means a written plan that  
10 describes the procedures and protocols for providing medical  
11 forensic services to sexual assault survivors who present  
12 themselves for such services, either directly or through  
13 transfer from a hospital or an approved pediatric health care  
14 facility.

15 "Transfer hospital" means a hospital with a sexual assault  
16 transfer plan approved by the Department.

17 "Transfer services" means the appropriate medical  
18 screening examination and necessary stabilizing treatment  
19 prior to the transfer of a sexual assault survivor to a  
20 hospital or an approved pediatric health care facility that  
21 provides medical forensic services to sexual assault survivors  
22 pursuant to a sexual assault treatment plan or areawide sexual  
23 assault treatment plan.

24 "Treatment hospital" means a hospital with a sexual  
25 assault treatment plan approved by the Department to provide  
26 medical forensic services to: (A) all sexual assault survivors

1 13 years of age or older who present with a complaint of sexual  
2 assault within a minimum of the last 7 days or who have  
3 disclosed past sexual assault by a specific individual and  
4 were in the care of that individual within a minimum of the  
5 last 7 days; and (B) pediatric sexual assault survivors who  
6 present with a complaint of sexual assault within a minimum of  
7 96 hours or who have disclosed past sexual assault by a  
8 specific individual and were in the care of that individual  
9 within a minimum of 96 hours.

10 "Treatment hospital with approved pediatric transfer"  
11 means a hospital with a treatment plan approved by the  
12 Department to provide medical forensic services to sexual  
13 assault survivors 13 years old or older who present with a  
14 complaint of sexual assault within a minimum of the last 7 days  
15 or who have disclosed past sexual assault by a specific  
16 individual and were in the care of that individual within a  
17 minimum of the last 7 days.

18 (b) This Section is effective on and after January 1, 2024  
19 ~~2022~~.

20 (Source: P.A. 101-81, eff. 7-12-19; 101-634, eff. 6-5-20;  
21 102-22, eff. 6-25-21; 102-538, eff. 8-20-21; 102-674, eff.  
22 11-30-21; revised 12-16-21.)

23 (410 ILCS 70/1a-1)

24 (Section scheduled to be repealed on December 31, 2023)

25 Sec. 1a-1. Definitions.



1 (a) In this Act:

2 "Advanced practice registered nurse" has the meaning  
3 provided in Section 50-10 of the Nurse Practice Act.

4 "Ambulance provider" means an individual or entity that  
5 owns and operates a business or service using ambulances or  
6 emergency medical services vehicles to transport emergency  
7 patients.

8 "Approved pediatric health care facility" means a health  
9 care facility, other than a hospital, with a sexual assault  
10 treatment plan approved by the Department to provide medical  
11 forensic services to: (A) pediatric sexual assault survivors  
12 who present with a complaint of sexual assault within a  
13 minimum of 96 hours ~~the last 7 days~~ or who have disclosed past  
14 sexual assault by a specific individual and were in the care of  
15 that individual within a minimum of 96 hours; and (B) sexual  
16 assault survivors at least 13 years of age but under 18 years  
17 of age who present with a complaint of sexual assault within a  
18 minimum of the last 7 days or who have disclosed past sexual  
19 assault by a specific individual and were in the care of that  
20 individual within a minimum of the last 7 days.

21 "Approved federally qualified health center" means a  
22 facility as defined in Section 1905(1)(2)(B) of the federal  
23 Social Security Act with a sexual assault treatment plan  
24 approved by the Department to provide medical forensic  
25 services to sexual assault survivors 13 years old or older who  
26 present with a complaint of sexual assault within a minimum of

1 the last 7 days or who have disclosed past sexual assault by a  
2 specific individual and were in the care of that individual  
3 within a minimum of the last 7 days.

4 "Areawide sexual assault treatment plan" means a plan,  
5 developed by hospitals or by hospitals, approved pediatric  
6 health care facilities, and approved federally qualified  
7 health centers in a community or area to be served, which  
8 provides for medical forensic services to sexual assault  
9 survivors that shall be made available by each of the  
10 participating hospitals and approved pediatric health care  
11 facilities.

12 "Board-certified child abuse pediatrician" means a  
13 physician certified by the American Board of Pediatrics in  
14 child abuse pediatrics.

15 "Board-eligible child abuse pediatrician" means a  
16 physician who has completed the requirements set forth by the  
17 American Board of Pediatrics to take the examination for  
18 certification in child abuse pediatrics.

19 "Department" means the Department of Public Health.

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

24 "Federally qualified health center" means a facility as  
25 defined in Section 1905(1)(2)(B) of the federal Social  
26 Security Act that provides primary care or sexual health

1 services.

2 "Follow-up healthcare" means healthcare services related  
3 to a sexual assault, including laboratory services and  
4 pharmacy services, rendered within 90 days of the initial  
5 visit for medical forensic services.

6 "Health care professional" means a physician, a physician  
7 assistant, a sexual assault forensic examiner, an advanced  
8 practice registered nurse, a registered professional nurse, a  
9 licensed practical nurse, or a sexual assault nurse examiner.

10 "Hospital" means a hospital licensed under the Hospital  
11 Licensing Act or operated under the University of Illinois  
12 Hospital Act, any outpatient center included in the hospital's  
13 sexual assault treatment plan where hospital employees provide  
14 medical forensic services, and an out-of-state hospital that  
15 has consented to the jurisdiction of the Department under  
16 Section 2.06-1.

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

23 "Law enforcement agency having jurisdiction" means the law  
24 enforcement agency in the jurisdiction where an alleged sexual  
25 assault or sexual abuse occurred.

26 "Licensed practical nurse" has the meaning provided in

1 Section 50-10 of the Nurse Practice Act.

2 "Medical forensic services" means health care delivered to  
3 patients within or under the care and supervision of personnel  
4 working in a designated emergency department of a hospital,  
5 approved pediatric health care facility, or an approved  
6 federally qualified health centers.

7 "Medical forensic services" includes, but is not limited  
8 to, taking a medical history, performing photo documentation,  
9 performing a physical and anogenital examination, assessing  
10 the patient for evidence collection, collecting evidence in  
11 accordance with a statewide sexual assault evidence collection  
12 program administered by the Department of State Police using  
13 the Illinois State Police Sexual Assault Evidence Collection  
14 Kit, if appropriate, assessing the patient for  
15 drug-facilitated or alcohol-facilitated sexual assault,  
16 providing an evaluation of and care for sexually transmitted  
17 infection and human immunodeficiency virus (HIV), pregnancy  
18 risk evaluation and care, and discharge and follow-up  
19 healthcare planning.

20 "Pediatric health care facility" means a clinic or  
21 physician's office that provides medical services to patients  
22 under the age of 18 ~~pediatric patients~~.

23 "Pediatric sexual assault survivor" means a person under  
24 the age of 13 who presents for medical forensic services in  
25 relation to injuries or trauma resulting from a sexual  
26 assault.

1 "Photo documentation" means digital photographs or  
2 colposcope videos stored and backed up securely in the  
3 original file format.

4 "Physician" means a person licensed to practice medicine  
5 in all its branches.

6 "Physician assistant" has the meaning provided in Section  
7 4 of the Physician Assistant Practice Act of 1987.

8 "Prepubescent sexual assault survivor" means a female who  
9 is under the age of 18 years and has not had a first menstrual  
10 cycle or a male who is under the age of 18 years and has not  
11 started to develop secondary sex characteristics who presents  
12 for medical forensic services in relation to injuries or  
13 trauma resulting from a sexual assault.

14 "Qualified medical provider" means a board-certified child  
15 abuse pediatrician, board-eligible child abuse pediatrician, a  
16 sexual assault forensic examiner, or a sexual assault nurse  
17 examiner who has access to photo documentation tools, and who  
18 participates in peer review.

19 "Registered Professional Nurse" has the meaning provided  
20 in Section 50-10 of the Nurse Practice Act.

21 "Sexual assault" means:

22 (1) an act of sexual conduct; as used in this  
23 paragraph, "sexual conduct" has the meaning provided under  
24 Section 11-0.1 of the Criminal Code of 2012; or

25 (2) any act of sexual penetration; as used in this  
26 paragraph, "sexual penetration" has the meaning provided

1 under Section 11-0.1 of the Criminal Code of 2012 and  
2 includes, without limitation, acts prohibited under  
3 Sections 11-1.20 through 11-1.60 of the Criminal Code of  
4 2012.

5 "Sexual assault forensic examiner" means a physician or  
6 physician assistant who has completed training that meets or  
7 is substantially similar to the Sexual Assault Nurse Examiner  
8 Education Guidelines established by the International  
9 Association of Forensic Nurses.

10 "Sexual assault nurse examiner" means an advanced practice  
11 registered nurse or registered professional nurse who has  
12 completed a sexual assault nurse examiner training program  
13 that meets the Sexual Assault Nurse Examiner Education  
14 Guidelines established by the International Association of  
15 Forensic Nurses.

16 "Sexual assault services voucher" means a document  
17 generated by a hospital or approved pediatric health care  
18 facility at the time the sexual assault survivor receives  
19 outpatient medical forensic services that may be used to seek  
20 payment for any ambulance services, medical forensic services,  
21 laboratory services, pharmacy services, and follow-up  
22 healthcare provided as a result of the sexual assault.

23 "Sexual assault survivor" means a person who presents for  
24 medical forensic services in relation to injuries or trauma  
25 resulting from a sexual assault.

26 "Sexual assault transfer plan" means a written plan

1 developed by a hospital and approved by the Department, which  
2 describes the hospital's procedures for transferring sexual  
3 assault survivors to another hospital, and an approved  
4 pediatric health care facility, if applicable, in order to  
5 receive medical forensic services.

6 "Sexual assault treatment plan" means a written plan that  
7 describes the procedures and protocols for providing medical  
8 forensic services to sexual assault survivors who present  
9 themselves for such services, either directly or through  
10 transfer from a hospital or an approved pediatric health care  
11 facility.

12 "Transfer hospital" means a hospital with a sexual assault  
13 transfer plan approved by the Department.

14 "Transfer services" means the appropriate medical  
15 screening examination and necessary stabilizing treatment  
16 prior to the transfer of a sexual assault survivor to a  
17 hospital or an approved pediatric health care facility that  
18 provides medical forensic services to sexual assault survivors  
19 pursuant to a sexual assault treatment plan or areawide sexual  
20 assault treatment plan.

21 "Treatment hospital" means a hospital with a sexual  
22 assault treatment plan approved by the Department to provide  
23 medical forensic services to: (A) all sexual assault survivors  
24 13 years of age or older who present with a complaint of sexual  
25 assault within a minimum of the last 7 days or who have  
26 disclosed past sexual assault by a specific individual and

1 were in the care of that individual within a minimum of the  
2 last 7 days; and (B) pediatric sexual assault survivors who  
3 present with a complaint of sexual assault within a minimum of  
4 96 hours or who have disclosed past sexual assault by a  
5 specific individual and were in the care of that individual  
6 within a minimum of 96 hours.

7 "Treatment hospital with approved pediatric transfer"  
8 means a hospital with a treatment plan approved by the  
9 Department to provide medical forensic services to sexual  
10 assault survivors 13 years old or older who present with a  
11 complaint of sexual assault within a minimum of the last 7 days  
12 or who have disclosed past sexual assault by a specific  
13 individual and were in the care of that individual within a  
14 minimum of the last 7 days.

15 (b) This Section is repealed on December 31, 2023.

16 (Source: P.A. 101-634, eff. 6-5-20; 102-22, eff. 6-25-21;  
17 102-674, eff. 11-30-21.)

18 (410 ILCS 70/1b new)

19 Sec. 1b. Subsequent medical forensic services; pediatric  
20 sexual assault survivors. Medical forensic services, as  
21 defined in this Act, including the evidence collection kit,  
22 may be offered to pediatric sexual assault survivors who  
23 present with a complaint of sexual assault or who have  
24 disclosed past sexual assault past 96 hours at the clinical  
25 discretion of the qualified medical provider. All pediatric



1 sexual assault survivors have access to a multidisciplinary  
2 team as defined in Section 2.5 of the Children's Advocacy  
3 Center Act. A member of the multidisciplinary team may access  
4 a qualified medical provider to determine the need for  
5 evidence collection beyond 96 hours.

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

7 Sec. 2. Hospital and approved pediatric health care  
8 facility requirements for sexual assault plans.

9 (a) Every hospital required to be licensed by the  
10 Department pursuant to the Hospital Licensing Act, or operated  
11 under the University of Illinois Hospital Act that provides  
12 general medical and surgical hospital services shall provide  
13 either (i) transfer services to all sexual assault survivors,  
14 (ii) medical forensic services to all sexual assault  
15 survivors, or (iii) transfer services to pediatric sexual  
16 assault survivors and medical forensic services to sexual  
17 assault survivors 13 years old or older, in accordance with  
18 rules adopted by the Department.

19 In addition, every such hospital, regardless of whether or  
20 not a request is made for reimbursement, shall submit to the  
21 Department a plan to provide either (i) transfer services to  
22 all sexual assault survivors, (ii) medical forensic services  
23 to all sexual assault survivors, or (iii) transfer services to  
24 pediatric sexual assault survivors and medical forensic  
25 services to sexual assault survivors 13 years old or older.

1 The Department shall approve such plan for either (i) transfer  
2 services to all sexual assault survivors, (ii) medical  
3 forensic services to all sexual assault survivors, or (iii)  
4 transfer services to pediatric sexual assault survivors and  
5 medical forensic services to sexual assault survivors 13 years  
6 old or older, if it finds that the implementation of the  
7 proposed plan would provide (i) transfer services or (ii)  
8 medical forensic services for sexual assault survivors in  
9 accordance with the requirements of this Act and provide  
10 sufficient protections from the risk of pregnancy to sexual  
11 assault survivors. Notwithstanding anything to the contrary in  
12 this paragraph, the Department may approve a sexual assault  
13 transfer plan for the provision of medical forensic services  
14 if:

15 (1) a treatment hospital with approved pediatric  
16 transfer has agreed, as part of an areawide treatment  
17 plan, to accept sexual assault survivors 13 years of age  
18 or older from the proposed transfer hospital, if the  
19 treatment hospital with approved pediatric transfer is  
20 geographically closer to the transfer hospital than a  
21 treatment hospital or another treatment hospital with  
22 approved pediatric transfer and such transfer is not  
23 unduly burdensome on the sexual assault survivor; and

24 (2) a treatment hospital has agreed, as a part of an  
25 areawide treatment plan, to accept sexual assault  
26 survivors under 13 years of age from the proposed transfer

1 hospital and transfer to the treatment hospital would not  
2 unduly burden the sexual assault survivor.

3 The Department may not approve a sexual assault transfer  
4 plan unless a treatment hospital has agreed, as a part of an  
5 areawide treatment plan, to accept sexual assault survivors  
6 from the proposed transfer hospital and a transfer to the  
7 treatment hospital would not unduly burden the sexual assault  
8 survivor.

9 In counties with a population of less than 1,000,000, the  
10 Department may not approve a sexual assault transfer plan for  
11 a hospital located within a 20-mile radius of a 4-year public  
12 university, not including community colleges, unless there is  
13 a treatment hospital or out-of-state hospital with a sexual  
14 assault treatment plan approved by the Department within a  
15 30-mile 20-mile radius of the 4-year public university. A  
16 hospital located within a 20-mile radius of a 4-year public  
17 university, not including community colleges, may be approved  
18 as a treatment hospital with pediatric transfer if there is a  
19 treatment hospital or out-of-state hospital with a sexual  
20 assault treatment plan within a 30-mile radius of the 4-year  
21 public university.

22 A transfer must be in accordance with federal and State  
23 laws and local ordinances.

24 A treatment hospital with approved pediatric transfer must  
25 submit an areawide treatment plan under Section 3 of this Act  
26 that includes a written agreement with a treatment hospital

1 stating that the treatment hospital will provide medical  
2 forensic services to pediatric sexual assault survivors  
3 transferred from the treatment hospital with approved  
4 pediatric transfer. The areawide treatment plan may also  
5 include an approved pediatric health care facility.

6 A transfer hospital must submit an areawide treatment plan  
7 under Section 3 of this Act that includes a written agreement  
8 with a treatment hospital stating that the treatment hospital  
9 will provide medical forensic services to all sexual assault  
10 survivors transferred from the transfer hospital. The areawide  
11 treatment plan may also include an approved pediatric health  
12 care facility. Notwithstanding anything to the contrary in  
13 this paragraph, the areawide treatment plan may include a  
14 written agreement with a treatment hospital with approved  
15 pediatric transfer that is geographically closer than other  
16 hospitals providing medical forensic services to sexual  
17 assault survivors 13 years of age or older stating that the  
18 treatment hospital with approved pediatric transfer will  
19 provide medical services to sexual assault survivors 13 years  
20 of age or older who are transferred from the transfer  
21 hospital. If the areawide treatment plan includes a written  
22 agreement with a treatment hospital with approved pediatric  
23 transfer, it must also include a written agreement with a  
24 treatment hospital stating that the treatment hospital will  
25 provide medical forensic services to sexual assault survivors  
26 under 13 years of age who are transferred from the transfer

1 hospital.

2 Beginning January 1, 2019, each treatment hospital and  
3 treatment hospital with approved pediatric transfer shall  
4 ensure that emergency department attending physicians,  
5 physician assistants, advanced practice registered nurses, and  
6 registered professional nurses providing clinical services,  
7 who do not meet the definition of a qualified medical provider  
8 in Section 1a of this Act, receive a minimum of 2 hours of  
9 sexual assault training by July 1, 2020 or until the treatment  
10 hospital or treatment hospital with approved pediatric  
11 transfer certifies to the Department, in a form and manner  
12 prescribed by the Department, that it employs or contracts  
13 with a qualified medical provider in accordance with  
14 subsection (a-7) of Section 5, whichever occurs first.

15 After July 1, 2020 or once a treatment hospital or a  
16 treatment hospital with approved pediatric transfer certifies  
17 compliance with subsection (a-7) of Section 5, whichever  
18 occurs first, each treatment hospital and treatment hospital  
19 with approved pediatric transfer shall ensure that emergency  
20 department attending physicians, physician assistants,  
21 advanced practice registered nurses, and registered  
22 professional nurses providing clinical services, who do not  
23 meet the definition of a qualified medical provider in Section  
24 1a of this Act, receive a minimum of 2 hours of continuing  
25 education on responding to sexual assault survivors every 2  
26 years. Protocols for training shall be included in the

1 hospital's sexual assault treatment plan.

2 Sexual assault training provided under this subsection may  
3 be provided in person or online and shall include, but not be  
4 limited to:

5 (1) information provided on the provision of medical  
6 forensic services;

7 (2) information on the use of the Illinois Sexual  
8 Assault Evidence Collection Kit;

9 (3) information on sexual assault epidemiology,  
10 neurobiology of trauma, drug-facilitated sexual assault,  
11 child sexual abuse, and Illinois sexual assault-related  
12 laws; and

13 (4) information on the hospital's sexual  
14 assault-related policies and procedures.

15 The online training made available by the Office of the  
16 Attorney General under subsection (b) of Section 10 may be  
17 used to comply with this subsection.

18 (b) An approved pediatric health care facility may provide  
19 medical forensic services, in accordance with rules adopted by  
20 the Department, to all pediatric sexual assault survivors who  
21 present for medical forensic services in relation to injuries  
22 or trauma resulting from a sexual assault. These services  
23 shall be provided by a qualified medical provider.

24 A pediatric health care facility must participate in or  
25 submit an areawide treatment plan under Section 3 of this Act  
26 that includes a treatment hospital. If a pediatric health care

1 facility does not provide certain medical or surgical services  
2 that are provided by hospitals, the areawide sexual assault  
3 treatment plan must include a procedure for ensuring a sexual  
4 assault survivor in need of such medical or surgical services  
5 receives the services at the treatment hospital. The areawide  
6 treatment plan may also include a treatment hospital with  
7 approved pediatric transfer.

8 The Department shall review a proposed sexual assault  
9 treatment plan submitted by a pediatric health care facility  
10 within 60 days after receipt of the plan. If the Department  
11 finds that the proposed plan meets the minimum requirements  
12 set forth in Section 5 of this Act and that implementation of  
13 the proposed plan would provide medical forensic services for  
14 pediatric sexual assault survivors, then the Department shall  
15 approve the plan. If the Department does not approve a plan,  
16 then the Department shall notify the pediatric health care  
17 facility that the proposed plan has not been approved. The  
18 pediatric health care facility shall have 30 days to submit a  
19 revised plan. The Department shall review the revised plan  
20 within 30 days after receipt of the plan and notify the  
21 pediatric health care facility whether the revised plan is  
22 approved or rejected. Until the Department has approved a  
23 treatment plan, a ~~A~~ pediatric health care facility may not  
24 provide medical forensic services to pediatric sexual assault  
25 survivors who present with a complaint of sexual assault  
26 within a minimum of 96 hours ~~the last 7 days~~ or who have

1 disclosed past sexual assault by a specific individual and  
2 were in the care of that individual within a minimum of 96  
3 hours ~~the last 7 days until the Department has approved a~~  
4 ~~treatment plan.~~

5 If an approved pediatric health care facility is not open  
6 24 hours a day, 7 days a week, it shall post signage at each  
7 public entrance to its facility that:

8 (1) is at least 14 inches by 14 inches in size;

9 (2) directs those seeking services as follows: "If  
10 closed, call 911 for services or go to the closest  
11 hospital emergency department, (insert name) located at  
12 (insert address).";

13 (3) lists the approved pediatric health care  
14 facility's hours of operation;

15 (4) lists the street address of the building;

16 (5) has a black background with white bold capital  
17 lettering in a clear and easy to read font that is at least  
18 72-point type, and with "call 911" in at least 125-point  
19 type;

20 (6) is posted clearly and conspicuously on or adjacent  
21 to the door at each entrance and, if building materials  
22 allow, is posted internally for viewing through glass; if  
23 posted externally, the sign shall be made of  
24 weather-resistant and theft-resistant materials,  
25 non-removable, and adhered permanently to the building;  
26 and



1           (7) has lighting that is part of the sign itself or is  
2           lit with a dedicated light that fully illuminates the  
3           sign.

4           A copy of the proposed sign must be submitted to the  
5           Department and approved as part of the approved pediatric  
6           health care facility's sexual assault treatment plan.

7           (c) Each treatment hospital, treatment hospital with  
8           approved pediatric transfer, and approved pediatric health  
9           care facility must enter into a memorandum of understanding  
10          with a rape crisis center for medical advocacy services, if  
11          these services are available to the treatment hospital,  
12          treatment hospital with approved pediatric transfer, or  
13          approved pediatric health care facility. With the consent of  
14          the sexual assault survivor, a rape crisis counselor shall  
15          remain in the exam room during the collection for forensic  
16          evidence.

17          (d) Every treatment hospital, treatment hospital with  
18          approved pediatric transfer, and approved pediatric health  
19          care facility's sexual assault treatment plan shall include  
20          procedures for complying with mandatory reporting requirements  
21          pursuant to (1) the Abused and Neglected Child Reporting Act;  
22          (2) the Abused and Neglected Long Term Care Facility Residents  
23          Reporting Act; (3) the Adult Protective Services Act; and (iv)  
24          the Criminal Identification Act.

25          (e) Each treatment hospital, treatment hospital with  
26          approved pediatric transfer, and approved pediatric health

1 care facility shall submit to the Department every 6 months,  
2 in a manner prescribed by the Department, the following  
3 information:

4 (1) The total number of patients who presented with a  
5 complaint of sexual assault.

6 (2) The total number of Illinois Sexual Assault  
7 Evidence Collection Kits:

8 (A) offered to (i) all sexual assault survivors  
9 and (ii) pediatric sexual assault survivors pursuant  
10 to paragraph (1.5) of subsection (a-5) of Section 5;

11 (B) completed for (i) all sexual assault survivors  
12 and (ii) pediatric sexual assault survivors; and

13 (C) declined by (i) all sexual assault survivors  
14 and (ii) pediatric sexual assault survivors.

15 This information shall be made available on the  
16 Department's website.

17 (f) This Section is effective on and after January 1,  
18 2024.

19 (Source: P.A. 101-73, eff. 7-12-19; 101-634, eff. 6-5-20;  
20 102-22, eff. 6-25-21; 102-674, eff. 11-30-21.)

21 (410 ILCS 70/2-1)

22 (Section scheduled to be repealed on December 31, 2023)

23 Sec. 2-1. Hospital, approved pediatric health care  
24 facility, and approved federally qualified health center  
25 requirements for sexual assault plans.

1           (a) Every hospital required to be licensed by the  
2 Department pursuant to the Hospital Licensing Act, or operated  
3 under the University of Illinois Hospital Act that provides  
4 general medical and surgical hospital services shall provide  
5 either (i) transfer services to all sexual assault survivors,  
6 (ii) medical forensic services to all sexual assault  
7 survivors, or (iii) transfer services to pediatric sexual  
8 assault survivors and medical forensic services to sexual  
9 assault survivors 13 years old or older, in accordance with  
10 rules adopted by the Department.

11           In addition, every such hospital, regardless of whether or  
12 not a request is made for reimbursement, shall submit to the  
13 Department a plan to provide either (i) transfer services to  
14 all sexual assault survivors, (ii) medical forensic services  
15 to all sexual assault survivors, or (iii) transfer services to  
16 pediatric sexual assault survivors and medical forensic  
17 services to sexual assault survivors 13 years old or older.  
18 The Department shall approve such plan for either (i) transfer  
19 services to all sexual assault survivors, (ii) medical  
20 forensic services to all sexual assault survivors, or (iii)  
21 transfer services to pediatric sexual assault survivors and  
22 medical forensic services to sexual assault survivors 13 years  
23 old or older, if it finds that the implementation of the  
24 proposed plan would provide (i) transfer services or (ii)  
25 medical forensic services for sexual assault survivors in  
26 accordance with the requirements of this Act and provide

1 sufficient protections from the risk of pregnancy to sexual  
2 assault survivors. Notwithstanding anything to the contrary in  
3 this paragraph, the Department may approve a sexual assault  
4 transfer plan for the provision of medical forensic services  
5 if:

6 (1) a treatment hospital with approved pediatric  
7 transfer has agreed, as part of an areawide treatment  
8 plan, to accept sexual assault survivors 13 years of age  
9 or older from the proposed transfer hospital, if the  
10 treatment hospital with approved pediatric transfer is  
11 geographically closer to the transfer hospital than a  
12 treatment hospital or another treatment hospital with  
13 approved pediatric transfer and such transfer is not  
14 unduly burdensome on the sexual assault survivor; and

15 (2) a treatment hospital has agreed, as a part of an  
16 areawide treatment plan, to accept sexual assault  
17 survivors under 13 years of age from the proposed transfer  
18 hospital and transfer to the treatment hospital would not  
19 unduly burden the sexual assault survivor.

20 The Department may not approve a sexual assault transfer  
21 plan unless a treatment hospital has agreed, as a part of an  
22 areawide treatment plan, to accept sexual assault survivors  
23 from the proposed transfer hospital and a transfer to the  
24 treatment hospital would not unduly burden the sexual assault  
25 survivor.

26 In counties with a population of less than 1,000,000, the

1 Department may not approve a sexual assault transfer plan for  
2 a hospital located within a 20-mile radius of a 4-year public  
3 university, not including community colleges, unless there is  
4 a treatment hospital or out-of-state hospital with a sexual  
5 assault treatment plan approved by the Department within a  
6 30-mile ~~20-mile~~ radius of the 4-year public university. A  
7 hospital located within a 20-mile radius of a 4-year public  
8 university, not including community colleges, may be approved  
9 as a treatment hospital with pediatric transfer if there is a  
10 treatment hospital or out-of-state hospital with a sexual  
11 assault treatment plan within a 30-mile radius of the 4-year  
12 public university.

13 A transfer must be in accordance with federal and State  
14 laws and local ordinances.

15 A treatment hospital with approved pediatric transfer must  
16 submit an areawide treatment plan under Section 3-1 of this  
17 Act that includes a written agreement with a treatment  
18 hospital stating that the treatment hospital will provide  
19 medical forensic services to pediatric sexual assault  
20 survivors transferred from the treatment hospital with  
21 approved pediatric transfer. The areawide treatment plan may  
22 also include an approved pediatric health care facility.

23 A transfer hospital must submit an areawide treatment plan  
24 under Section 3-1 of this Act that includes a written  
25 agreement with a treatment hospital stating that the treatment  
26 hospital will provide medical forensic services to all sexual

1 assault survivors transferred from the transfer hospital. The  
2 areawide treatment plan may also include an approved pediatric  
3 health care facility. Notwithstanding anything to the contrary  
4 in this paragraph, the areawide treatment plan may include a  
5 written agreement with a treatment hospital with approved  
6 pediatric transfer that is geographically closer than other  
7 hospitals providing medical forensic services to sexual  
8 assault survivors 13 years of age or older stating that the  
9 treatment hospital with approved pediatric transfer will  
10 provide medical services to sexual assault survivors 13 years  
11 of age or older who are transferred from the transfer  
12 hospital. If the areawide treatment plan includes a written  
13 agreement with a treatment hospital with approved pediatric  
14 transfer, it must also include a written agreement with a  
15 treatment hospital stating that the treatment hospital will  
16 provide medical forensic services to sexual assault survivors  
17 under 13 years of age who are transferred from the transfer  
18 hospital.

19 Beginning January 1, 2019, each treatment hospital and  
20 treatment hospital with approved pediatric transfer shall  
21 ensure that emergency department attending physicians,  
22 physician assistants, advanced practice registered nurses, and  
23 registered professional nurses providing clinical services,  
24 who do not meet the definition of a qualified medical provider  
25 in Section 1a-1 of this Act, receive a minimum of 2 hours of  
26 sexual assault training by July 1, 2020 or until the treatment

1 hospital or treatment hospital with approved pediatric  
2 transfer certifies to the Department, in a form and manner  
3 prescribed by the Department, that it employs or contracts  
4 with a qualified medical provider in accordance with  
5 subsection (a-7) of Section 5-1, whichever occurs first.

6 After July 1, 2020 or once a treatment hospital or a  
7 treatment hospital with approved pediatric transfer certifies  
8 compliance with subsection (a-7) of Section 5-1, whichever  
9 occurs first, each treatment hospital and treatment hospital  
10 with approved pediatric transfer shall ensure that emergency  
11 department attending physicians, physician assistants,  
12 advanced practice registered nurses, and registered  
13 professional nurses providing clinical services, who do not  
14 meet the definition of a qualified medical provider in Section  
15 1a-1 of this Act, receive a minimum of 2 hours of continuing  
16 education on responding to sexual assault survivors every 2  
17 years. Protocols for training shall be included in the  
18 hospital's sexual assault treatment plan.

19 Sexual assault training provided under this subsection may  
20 be provided in person or online and shall include, but not be  
21 limited to:

22 (1) information provided on the provision of medical  
23 forensic services;

24 (2) information on the use of the Illinois Sexual  
25 Assault Evidence Collection Kit;

26 (3) information on sexual assault epidemiology,

1 neurobiology of trauma, drug-facilitated sexual assault,  
2 child sexual abuse, and Illinois sexual assault-related  
3 laws; and

4 (4) information on the hospital's sexual  
5 assault-related policies and procedures.

6 The online training made available by the Office of the  
7 Attorney General under subsection (b) of Section 10-1 may be  
8 used to comply with this subsection.

9 (b) An approved pediatric health care facility may provide  
10 medical forensic services, in accordance with rules adopted by  
11 the Department, to all pediatric sexual assault survivors who  
12 present for medical forensic services in relation to injuries  
13 or trauma resulting from a sexual assault. These services  
14 shall be provided by a qualified medical provider.

15 A pediatric health care facility must participate in or  
16 submit an areawide treatment plan under Section 3-1 of this  
17 Act that includes a treatment hospital. If a pediatric health  
18 care facility does not provide certain medical or surgical  
19 services that are provided by hospitals, the areawide sexual  
20 assault treatment plan must include a procedure for ensuring a  
21 sexual assault survivor in need of such medical or surgical  
22 services receives the services at the treatment hospital. The  
23 areawide treatment plan may also include a treatment hospital  
24 with approved pediatric transfer.

25 The Department shall review a proposed sexual assault  
26 treatment plan submitted by a pediatric health care facility



1 within 60 days after receipt of the plan. If the Department  
2 finds that the proposed plan meets the minimum requirements  
3 set forth in Section 5-1 of this Act and that implementation of  
4 the proposed plan would provide medical forensic services for  
5 pediatric sexual assault survivors, then the Department shall  
6 approve the plan. If the Department does not approve a plan,  
7 then the Department shall notify the pediatric health care  
8 facility that the proposed plan has not been approved. The  
9 pediatric health care facility shall have 30 days to submit a  
10 revised plan. The Department shall review the revised plan  
11 within 30 days after receipt of the plan and notify the  
12 pediatric health care facility whether the revised plan is  
13 approved or rejected. Until the Department has approved a  
14 treatment plan, a ~~A~~ pediatric health care facility may not  
15 provide medical forensic services to pediatric sexual assault  
16 survivors who present with a complaint of sexual assault  
17 within a minimum of 96 hours ~~the last 7 days~~ or who have  
18 disclosed past sexual assault by a specific individual and  
19 were in the care of that individual within a minimum of 96  
20 hours ~~the last 7 days until the Department has approved a~~  
21 ~~treatment plan.~~

22 If an approved pediatric health care facility is not open  
23 24 hours a day, 7 days a week, it shall post signage at each  
24 public entrance to its facility that:

25 (1) is at least 14 inches by 14 inches in size;

26 (2) directs those seeking services as follows: "If

1 closed, call 911 for services or go to the closest  
2 hospital emergency department, (insert name) located at  
3 (insert address).";

4 (3) lists the approved pediatric health care  
5 facility's hours of operation;

6 (4) lists the street address of the building;

7 (5) has a black background with white bold capital  
8 lettering in a clear and easy to read font that is at least  
9 72-point type, and with "call 911" in at least 125-point  
10 type;

11 (6) is posted clearly and conspicuously on or adjacent  
12 to the door at each entrance and, if building materials  
13 allow, is posted internally for viewing through glass; if  
14 posted externally, the sign shall be made of  
15 weather-resistant and theft-resistant materials,  
16 non-removable, and adhered permanently to the building;  
17 and

18 (7) has lighting that is part of the sign itself or is  
19 lit with a dedicated light that fully illuminates the  
20 sign.

21 (b-5) An approved federally qualified health center may  
22 provide medical forensic services, in accordance with rules  
23 adopted by the Department, to all sexual assault survivors 13  
24 years old or older who present for medical forensic services  
25 in relation to injuries or trauma resulting from a sexual  
26 assault during the duration, and 90 days thereafter, of a

1 proclamation issued by the Governor declaring a disaster, or a  
2 successive proclamation regarding the same disaster, in all  
3 102 counties due to a public health emergency. These services  
4 shall be provided by (i) a qualified medical provider,  
5 physician, physician assistant, or advanced practice  
6 registered nurse who has received a minimum of 10 hours of  
7 sexual assault training provided by a qualified medical  
8 provider on current Illinois legislation, how to properly  
9 perform a medical forensic examination, evidence collection,  
10 drug and alcohol facilitated sexual assault, and forensic  
11 photography and has all documentation and photos peer reviewed  
12 by a qualified medical provider or (ii) until the federally  
13 qualified health care center certifies to the Department, in a  
14 form and manner prescribed by the Department, that it employs  
15 or contracts with a qualified medical provider in accordance  
16 with subsection (a-7) of Section 5-1, whichever occurs first.

17 A federally qualified health center must participate in or  
18 submit an areawide treatment plan under Section 3-1 of this  
19 Act that includes a treatment hospital. If a federally  
20 qualified health center does not provide certain medical or  
21 surgical services that are provided by hospitals, the areawide  
22 sexual assault treatment plan must include a procedure for  
23 ensuring a sexual assault survivor in need of such medical or  
24 surgical services receives the services at the treatment  
25 hospital. The areawide treatment plan may also include a  
26 treatment hospital with approved pediatric transfer or an

1 approved pediatric health care facility.

2 The Department shall review a proposed sexual assault  
3 treatment plan submitted by a federally qualified health  
4 center within 14 days after receipt of the plan. If the  
5 Department finds that the proposed plan meets the minimum  
6 requirements set forth in Section 5-1 and that implementation  
7 of the proposed plan would provide medical forensic services  
8 for sexual assault survivors 13 years old or older, then the  
9 Department shall approve the plan. If the Department does not  
10 approve a plan, then the Department shall notify the federally  
11 qualified health center that the proposed plan has not been  
12 approved. The federally qualified health center shall have 14  
13 days to submit a revised plan. The Department shall review the  
14 revised plan within 14 days after receipt of the plan and  
15 notify the federally qualified health center whether the  
16 revised plan is approved or rejected. A federally qualified  
17 health center may not (i) provide medical forensic services to  
18 sexual assault survivors 13 years old or older who present  
19 with a complaint of sexual assault within a minimum of the  
20 previous 7 days or (ii) who have disclosed past sexual assault  
21 by a specific individual and were in the care of that  
22 individual within a minimum of the previous 7 days until the  
23 Department has approved a treatment plan.

24 If an approved federally qualified health center is not  
25 open 24 hours a day, 7 days a week, it shall post signage at  
26 each public entrance to its facility that:

1 (1) is at least 14 inches by 14 inches in size;

2 (2) directs those seeking services as follows: "If  
3 closed, call 911 for services or go to the closest  
4 hospital emergency department, (insert name) located at  
5 (insert address).";

6 (3) lists the approved federally qualified health  
7 center's hours of operation;

8 (4) lists the street address of the building;

9 (5) has a black background with white bold capital  
10 lettering in a clear and easy to read font that is at least  
11 72-point type, and with "call 911" in at least 125-point  
12 type;

13 (6) is posted clearly and conspicuously on or adjacent  
14 to the door at each entrance and, if building materials  
15 allow, is posted internally for viewing through glass; if  
16 posted externally, the sign shall be made of  
17 weather-resistant and theft-resistant materials,  
18 non-removable, and adhered permanently to the building;  
19 and

20 (7) has lighting that is part of the sign itself or is  
21 lit with a dedicated light that fully illuminates the  
22 sign.

23 A copy of the proposed sign must be submitted to the  
24 Department and approved as part of the approved federally  
25 qualified health center's sexual assault treatment plan.

26 (c) Each treatment hospital, treatment hospital with

1 approved pediatric transfer, approved pediatric health care  
2 facility, and approved federally qualified health center must  
3 enter into a memorandum of understanding with a rape crisis  
4 center for medical advocacy services, if these services are  
5 available to the treatment hospital, treatment hospital with  
6 approved pediatric transfer, approved pediatric health care  
7 facility, or approved federally qualified health center. With  
8 the consent of the sexual assault survivor, a rape crisis  
9 counselor shall remain in the exam room during the collection  
10 for forensic evidence.

11 (d) Every treatment hospital, treatment hospital with  
12 approved pediatric transfer, approved pediatric health care  
13 facility, and approved federally qualified health center's  
14 sexual assault treatment plan shall include procedures for  
15 complying with mandatory reporting requirements pursuant to  
16 (1) the Abused and Neglected Child Reporting Act; (2) the  
17 Abused and Neglected Long Term Care Facility Residents  
18 Reporting Act; (3) the Adult Protective Services Act; and (iv)  
19 the Criminal Identification Act.

20 (e) Each treatment hospital, treatment hospital with  
21 approved pediatric transfer, approved pediatric health care  
22 facility, and approved federally qualified health center shall  
23 submit to the Department every 6 months, in a manner  
24 prescribed by the Department, the following information:

25 (1) The total number of patients who presented with a  
26 complaint of sexual assault.

1           (2) The total number of Illinois Sexual Assault  
2 Evidence Collection Kits:

3           (A) offered to (i) all sexual assault survivors  
4 and (ii) pediatric sexual assault survivors pursuant  
5 to paragraph (1.5) of subsection (a-5) of Section 5-1;

6           (B) completed for (i) all sexual assault survivors  
7 and (ii) pediatric sexual assault survivors; and

8           (C) declined by (i) all sexual assault survivors  
9 and (ii) pediatric sexual assault survivors.

10           This information shall be made available on the  
11 Department's website.

12           (f) This Section is repealed on December 31, 2023.

13           (Source: P.A. 101-634, eff. 6-5-20; 102-22, eff. 6-25-21;  
14 102-674, eff. 11-30-21.)

15           (410 ILCS 70/2.1) (from Ch. 111 1/2, par. 87-2.1)

16           Sec. 2.1. Plan of correction; penalties.

17           (a) If the Department surveyor determines that the  
18 hospital or approved pediatric health care facility is not in  
19 compliance with its approved plan, the surveyor shall provide  
20 the hospital or approved pediatric health care facility with a  
21 written list of the specific items of noncompliance within 10  
22 working days after the conclusion of the on-site review. The  
23 hospital shall have 10 working days to submit to the  
24 Department a plan of correction which contains the hospital's  
25 or approved pediatric health care facility's specific

1 proposals for correcting the items of noncompliance. The  
2 Department shall review the plan of correction and notify the  
3 hospital in writing within 10 working days as to whether the  
4 plan is acceptable or unacceptable.

5 If the Department finds the Plan of Correction  
6 unacceptable, the hospital or approved pediatric health care  
7 facility shall have 10 working days to resubmit an acceptable  
8 Plan of Correction. Upon notification that its Plan of  
9 Correction is acceptable, a hospital or approved pediatric  
10 health care facility shall implement the Plan of Correction  
11 within 60 days.

12 (b) The failure of a hospital to submit an acceptable Plan  
13 of Correction or to implement the Plan of Correction, within  
14 the time frames required in this Section, will subject a  
15 hospital to the imposition of a fine by the Department. The  
16 Department may impose a fine of up to \$500 per day until a  
17 hospital complies with the requirements of this Section. No  
18 enforcement action or fine shall be taken or assessed until  
19 (i) 12 months after the effective date of this amendatory Act  
20 of the 102nd General Assembly or (ii) after the end of a public  
21 health emergency declared by a State or federal governmental  
22 entity, whichever is later.

23 If an approved pediatric health care facility fails to  
24 submit an acceptable Plan of Correction or to implement the  
25 Plan of Correction within the time frames required in this  
26 Section, then the Department shall notify the approved



1 pediatric health care facility that the approved pediatric  
2 health care facility may not provide medical forensic services  
3 under this Act. The Department may impose a fine of up to \$500  
4 per patient provided services in violation of this Act.

5 (c) Before imposing a fine pursuant to this Section, the  
6 Department shall provide the hospital or approved pediatric  
7 health care facility via certified mail with written notice  
8 and an opportunity for an administrative hearing. Such hearing  
9 must be requested within 10 working days after receipt of the  
10 Department's Notice. All hearings shall be conducted in  
11 accordance with the Department's rules in administrative  
12 hearings.

13 (d) This Section is effective on and after January 1,  
14 2024.

15 (Source: P.A. 101-81, eff. 7-12-19; 101-634, eff. 6-5-20;  
16 102-22, eff. 6-25-21; 102-674, eff. 11-30-21.)

17 (410 ILCS 70/2.1-1)

18 (Section scheduled to be repealed on December 31, 2023)

19 Sec. 2.1-1. Plan of correction; penalties.

20 (a) If the Department surveyor determines that the  
21 hospital, approved pediatric health care facility, or approved  
22 federally qualified health center is not in compliance with  
23 its approved plan, the surveyor shall provide the hospital,  
24 approved pediatric health care facility, or approved federally  
25 qualified health center with a written list of the specific

1 items of noncompliance within 10 working days after the  
2 conclusion of the on-site review. The hospital, approved  
3 pediatric health care facility, or approved federally  
4 qualified health center shall have 10 working days to submit  
5 to the Department a plan of correction which contains the  
6 hospital's, approved pediatric health care facility's, or  
7 approved federally qualified health center's specific  
8 proposals for correcting the items of noncompliance. The  
9 Department shall review the plan of correction and notify the  
10 hospital, approved pediatric health care facility, or approved  
11 federally qualified health center in writing within 10 working  
12 days as to whether the plan is acceptable or unacceptable.

13 If the Department finds the Plan of Correction  
14 unacceptable, the hospital, approved pediatric health care  
15 facility, or approved federally qualified health center shall  
16 have 10 working days to resubmit an acceptable Plan of  
17 Correction. Upon notification that its Plan of Correction is  
18 acceptable, a hospital, approved pediatric health care  
19 facility, or approved federally qualified health center shall  
20 implement the Plan of Correction within 60 days.

21 (b) The failure of a hospital to submit an acceptable Plan  
22 of Correction or to implement the Plan of Correction, within  
23 the time frames required in this Section, will subject a  
24 hospital to the imposition of a fine by the Department. The  
25 Department may impose a fine of up to \$500 per day until a  
26 hospital complies with the requirements of this Section. No

1 enforcement action or fine shall be taken or assessed until  
2 (i) 12 months after the effective date of this amendatory Act  
3 of the 102nd General Assembly or (ii) after the end of a public  
4 health emergency declared by a State or federal governmental  
5 entity, whichever is later.

6 If an approved pediatric health care facility or approved  
7 federally qualified health center fails to submit an  
8 acceptable Plan of Correction or to implement the Plan of  
9 Correction within the time frames required in this Section,  
10 then the Department shall notify the approved pediatric health  
11 care facility or approved federally qualified health center  
12 that the approved pediatric health care facility or approved  
13 federally qualified health center may not provide medical  
14 forensic services under this Act. The Department may impose a  
15 fine of up to \$500 per patient provided services in violation  
16 of this Act.

17 (c) Before imposing a fine pursuant to this Section, the  
18 Department shall provide the hospital, or approved pediatric  
19 health care facility, or approved federally qualified health  
20 center via certified mail with written notice and an  
21 opportunity for an administrative hearing. Such hearing must  
22 be requested within 10 working days after receipt of the  
23 Department's Notice. All hearings shall be conducted in  
24 accordance with the Department's rules in administrative  
25 hearings.

26 (d) This Section is repealed on December 31, 2023.

1 (Source: P.A. 101-634, eff. 6-5-20; 102-22, eff. 6-25-21;  
2 102-674, eff. 11-30-21.)

3 (410 ILCS 70/5) (from Ch. 111 1/2, par. 87-5)

4 Sec. 5. Minimum requirements for medical forensic services  
5 provided to sexual assault survivors by hospitals and approved  
6 pediatric health care facilities.

7 (a) Every hospital and approved pediatric health care  
8 facility providing medical forensic services to sexual assault  
9 survivors under this Act shall, as minimum requirements for  
10 such services, provide, with the consent of the sexual assault  
11 survivor, and as ordered by the attending physician, an  
12 advanced practice registered nurse, or a physician assistant,  
13 the services set forth in subsection (a-5).

14 Beginning January 1, 2024 ~~2023~~, a qualified medical  
15 provider must provide the services set forth in subsection  
16 (a-5).

17 (a-5) A treatment hospital, a treatment hospital with  
18 approved pediatric transfer, or an approved pediatric health  
19 care facility shall provide the following services in  
20 accordance with subsection (a):

21 (1) Appropriate medical forensic services without  
22 delay, in a private, age-appropriate or  
23 developmentally-appropriate space, required to ensure the  
24 health, safety, and welfare of a sexual assault survivor  
25 and which may be used as evidence in a criminal proceeding

1 against a person accused of the sexual assault, in a  
2 proceeding under the Juvenile Court Act of 1987, or in an  
3 investigation under the Abused and Neglected Child  
4 Reporting Act.

5 Records of medical forensic services, including  
6 results of examinations and tests, the Illinois State  
7 Police Medical Forensic Documentation Forms, the Illinois  
8 State Police Patient Discharge Materials, and the Illinois  
9 State Police Patient Consent: Collect and Test Evidence or  
10 Collect and Hold Evidence Form, shall be maintained by the  
11 hospital or approved pediatric health care facility as  
12 part of the patient's electronic medical record.

13 Records of medical forensic services of sexual assault  
14 survivors under the age of 18 shall be retained by the  
15 hospital for a period of 60 years after the sexual assault  
16 survivor reaches the age of 18. Records of medical  
17 forensic services of sexual assault survivors 18 years of  
18 age or older shall be retained by the hospital for a period  
19 of 20 years after the date the record was created.

20 Records of medical forensic services may only be  
21 disseminated in accordance with Section 6.5 of this Act  
22 and other State and federal law.

23 (1.5) An offer to complete the Illinois Sexual Assault  
24 Evidence Collection Kit for: (A) any sexual assault  
25 survivor 13 years of age or older who presents within a  
26 minimum of the last 7 days of the assault or who has

1 disclosed past sexual assault by a specific individual and  
2 was in the care of that individual within a minimum of the  
3 last 7 days; and (B) any pediatric sexual assault survivor  
4 who presents with a complaint of sexual assault within a  
5 minimum of 96 hours or who has disclosed past sexual  
6 assault by a specific individual and was in the care of  
7 that individual within a minimum of 96 hours.

8 (A) Appropriate oral and written information  
9 concerning evidence-based guidelines for the  
10 appropriateness of evidence collection depending on  
11 the sexual development of the sexual assault survivor,  
12 the type of sexual assault, and the timing of the  
13 sexual assault shall be provided to the sexual assault  
14 survivor. ~~Evidence collection is encouraged for~~  
15 ~~prepubescent sexual assault survivors who present to a~~  
16 ~~hospital or approved pediatric health care facility~~  
17 ~~with a complaint of sexual assault within a minimum of~~  
18 ~~96 hours after the sexual assault.~~

19 Before January 1, 2024 ~~2023~~, the information  
20 required under this subparagraph shall be provided in  
21 person by the health care professional providing  
22 medical forensic services directly to the sexual  
23 assault survivor.

24 On and after January 1, 2024 ~~2023~~, the information  
25 required under this subparagraph shall be provided in  
26 person by the qualified medical provider providing

1 medical forensic services directly to the sexual  
2 assault survivor.

3 The written information provided shall be the  
4 information created in accordance with Section 10 of  
5 this Act.

6 (B) Following the discussion regarding the  
7 evidence-based guidelines for evidence collection in  
8 accordance with subparagraph (A), evidence collection  
9 must be completed at the sexual assault survivor's  
10 request. A sexual assault nurse examiner conducting an  
11 examination using the Illinois State Police Sexual  
12 Assault Evidence Collection Kit may do so without the  
13 presence or participation of a physician.

14 (2) Appropriate oral and written information  
15 concerning the possibility of infection, sexually  
16 transmitted infection, including an evaluation of the  
17 sexual assault survivor's risk of contracting human  
18 immunodeficiency virus (HIV) from sexual assault, and  
19 pregnancy resulting from sexual assault.

20 (3) Appropriate oral and written information  
21 concerning accepted medical procedures, laboratory tests,  
22 medication, and possible contraindications of such  
23 medication available for the prevention or treatment of  
24 infection or disease resulting from sexual assault.

25 (3.5) After a medical evidentiary or physical  
26 examination, access to a shower at no cost, unless

1 showering facilities are unavailable.

2 (4) An amount of medication, including HIV  
3 prophylaxis, for treatment at the hospital or approved  
4 pediatric health care facility and after discharge as is  
5 deemed appropriate by the attending physician, an advanced  
6 practice registered nurse, or a physician assistant in  
7 accordance with the Centers for Disease Control and  
8 Prevention guidelines and consistent with the hospital's  
9 or approved pediatric health care facility's current  
10 approved protocol for sexual assault survivors.

11 (5) Photo documentation of the sexual assault  
12 survivor's injuries, anatomy involved in the assault, or  
13 other visible evidence on the sexual assault survivor's  
14 body to supplement the medical forensic history and  
15 written documentation of physical findings and evidence  
16 beginning July 1, 2019. Photo documentation does not  
17 replace written documentation of the injury.

18 (6) Written and oral instructions indicating the need  
19 for follow-up examinations and laboratory tests after the  
20 sexual assault to determine the presence or absence of  
21 sexually transmitted infection.

22 (7) Referral by hospital or approved pediatric health  
23 care facility personnel for appropriate counseling.

24 (8) Medical advocacy services provided by a rape  
25 crisis counselor whose communications are protected under  
26 Section 8-802.1 of the Code of Civil Procedure, if there



1 is a memorandum of understanding between the hospital or  
2 approved pediatric health care facility and a rape crisis  
3 center. With the consent of the sexual assault survivor, a  
4 rape crisis counselor shall remain in the exam room during  
5 the medical forensic examination.

6 (9) Written information regarding services provided by  
7 a Children's Advocacy Center and rape crisis center, if  
8 applicable.

9 (10) A treatment hospital, a treatment hospital with  
10 approved pediatric transfer, an out-of-state hospital as  
11 defined in Section 5.4, or an approved pediatric health  
12 care facility shall comply with the rules relating to the  
13 collection and tracking of sexual assault evidence adopted  
14 by the Illinois State Police under Section 50 of the  
15 Sexual Assault Evidence Submission Act.

16 (11) Written information regarding the Illinois State  
17 Police sexual assault evidence tracking system.

18 (a-7) By January 1, 2024 ~~2023~~, every hospital with a  
19 treatment plan approved by the Department shall employ or  
20 contract with a qualified medical provider to initiate medical  
21 forensic services to a sexual assault survivor within 90  
22 minutes of the patient presenting to the treatment hospital or  
23 treatment hospital with approved pediatric transfer. The  
24 provision of medical forensic services by a qualified medical  
25 provider shall not delay the provision of life-saving medical  
26 care.

1 (b) Any person who is a sexual assault survivor who seeks  
2 medical forensic services or follow-up healthcare under this  
3 Act shall be provided such services without the consent of any  
4 parent, guardian, custodian, surrogate, or agent. If a sexual  
5 assault survivor is unable to consent to medical forensic  
6 services, the services may be provided under the Consent by  
7 Minors to Health Care Services ~~Medical Procedures~~ Act, the  
8 Health Care Surrogate Act, or other applicable State and  
9 federal laws.

10 (b-5) Every hospital or approved pediatric health care  
11 facility providing medical forensic services to sexual assault  
12 survivors shall issue a voucher to any sexual assault survivor  
13 who is eligible to receive one in accordance with Section 5.2  
14 of this Act. The hospital shall make a copy of the voucher and  
15 place it in the medical record of the sexual assault survivor.  
16 The hospital shall provide a copy of the voucher to the sexual  
17 assault survivor after discharge upon request.

18 (c) Nothing in this Section creates a physician-patient  
19 relationship that extends beyond discharge from the hospital  
20 or approved pediatric health care facility.

21 (d) This Section is effective on and after January 1, 2024  
22 ~~2022~~.

23 (Source: P.A. 101-81, eff. 7-12-19; 101-377, eff. 8-16-19;  
24 101-634, eff. 6-5-20; 102-22, eff. 6-25-21; 102-538, eff.  
25 8-20-21; 102-674, eff. 11-30-21; revised 12-16-21.)

1 (410 ILCS 70/5-1)

2 (Section scheduled to be repealed on December 31, 2023)

3 Sec. 5-1. Minimum requirements for medical forensic  
4 services provided to sexual assault survivors by hospitals,  
5 approved pediatric health care facilities, and approved  
6 federally qualified health centers.

7 (a) Every hospital, approved pediatric health care  
8 facility, and approved federally qualified health center  
9 providing medical forensic services to sexual assault  
10 survivors under this Act shall, as minimum requirements for  
11 such services, provide, with the consent of the sexual assault  
12 survivor, and as ordered by the attending physician, an  
13 advanced practice registered nurse, or a physician assistant,  
14 the services set forth in subsection (a-5).

15 Beginning January 1, 2023, a qualified medical provider  
16 must provide the services set forth in subsection (a-5).

17 (a-5) A treatment hospital, a treatment hospital with  
18 approved pediatric transfer, or an approved pediatric health  
19 care facility, or an approved federally qualified health  
20 center shall provide the following services in accordance with  
21 subsection (a):

22 (1) Appropriate medical forensic services without  
23 delay, in a private, age-appropriate or  
24 developmentally-appropriate space, required to ensure the  
25 health, safety, and welfare of a sexual assault survivor  
26 and which may be used as evidence in a criminal proceeding

1 against a person accused of the sexual assault, in a  
2 proceeding under the Juvenile Court Act of 1987, or in an  
3 investigation under the Abused and Neglected Child  
4 Reporting Act.

5 Records of medical forensic services, including  
6 results of examinations and tests, the Illinois State  
7 Police Medical Forensic Documentation Forms, the Illinois  
8 State Police Patient Discharge Materials, and the Illinois  
9 State Police Patient Consent: Collect and Test Evidence or  
10 Collect and Hold Evidence Form, shall be maintained by the  
11 hospital or approved pediatric health care facility as  
12 part of the patient's electronic medical record.

13 Records of medical forensic services of sexual assault  
14 survivors under the age of 18 shall be retained by the  
15 hospital for a period of 60 years after the sexual assault  
16 survivor reaches the age of 18. Records of medical  
17 forensic services of sexual assault survivors 18 years of  
18 age or older shall be retained by the hospital for a period  
19 of 20 years after the date the record was created.

20 Records of medical forensic services may only be  
21 disseminated in accordance with Section 6.5-1 of this Act  
22 and other State and federal law.

23 (1.5) An offer to complete the Illinois Sexual Assault  
24 Evidence Collection Kit for: (A) any sexual assault  
25 survivor 13 years of age or older who presents within a  
26 minimum of the last 7 days of the assault or who has

1 disclosed past sexual assault by a specific individual and  
2 was in the care of that individual within a minimum of the  
3 last 7 days; and (B) any pediatric sexual assault survivor  
4 who presents with a complaint of sexual assault within a  
5 minimum of 96 hours or who has disclosed past sexual  
6 assault by a specific individual and was in the care of  
7 that individual within a minimum of 96 hours.

8 (A) Appropriate oral and written information  
9 concerning evidence-based guidelines for the  
10 appropriateness of evidence collection depending on  
11 the sexual development of the sexual assault survivor,  
12 the type of sexual assault, and the timing of the  
13 sexual assault shall be provided to the sexual assault  
14 survivor. ~~Evidence collection is encouraged for~~  
15 ~~prepubescent sexual assault survivors who present to a~~  
16 ~~hospital or approved pediatric health care facility~~  
17 ~~with a complaint of sexual assault within a minimum of~~  
18 ~~96 hours after the sexual assault.~~

19 Before January 1, 2023, the information required  
20 under this subparagraph shall be provided in person by  
21 the health care professional providing medical  
22 forensic services directly to the sexual assault  
23 survivor.

24 On and after January 1, 2023, the information  
25 required under this subparagraph shall be provided in  
26 person by the qualified medical provider providing

1 medical forensic services directly to the sexual  
2 assault survivor.

3 The written information provided shall be the  
4 information created in accordance with Section 10-1 of  
5 this Act.

6 (B) Following the discussion regarding the  
7 evidence-based guidelines for evidence collection in  
8 accordance with subparagraph (A), evidence collection  
9 must be completed at the sexual assault survivor's  
10 request. A sexual assault nurse examiner conducting an  
11 examination using the Illinois State Police Sexual  
12 Assault Evidence Collection Kit may do so without the  
13 presence or participation of a physician.

14 (2) Appropriate oral and written information  
15 concerning the possibility of infection, sexually  
16 transmitted infection, including an evaluation of the  
17 sexual assault survivor's risk of contracting human  
18 immunodeficiency virus (HIV) from sexual assault, and  
19 pregnancy resulting from sexual assault.

20 (3) Appropriate oral and written information  
21 concerning accepted medical procedures, laboratory tests,  
22 medication, and possible contraindications of such  
23 medication available for the prevention or treatment of  
24 infection or disease resulting from sexual assault.

25 (3.5) After a medical evidentiary or physical  
26 examination, access to a shower at no cost, unless

1 showering facilities are unavailable.

2 (4) An amount of medication, including HIV  
3 prophylaxis, for treatment at the hospital or approved  
4 pediatric health care facility and after discharge as is  
5 deemed appropriate by the attending physician, an advanced  
6 practice registered nurse, or a physician assistant in  
7 accordance with the Centers for Disease Control and  
8 Prevention guidelines and consistent with the hospital's  
9 or approved pediatric health care facility's current  
10 approved protocol for sexual assault survivors.

11 (5) Photo documentation of the sexual assault  
12 survivor's injuries, anatomy involved in the assault, or  
13 other visible evidence on the sexual assault survivor's  
14 body to supplement the medical forensic history and  
15 written documentation of physical findings and evidence  
16 beginning July 1, 2019. Photo documentation does not  
17 replace written documentation of the injury.

18 (6) Written and oral instructions indicating the need  
19 for follow-up examinations and laboratory tests after the  
20 sexual assault to determine the presence or absence of  
21 sexually transmitted infection.

22 (7) Referral by hospital or approved pediatric health  
23 care facility personnel for appropriate counseling.

24 (8) Medical advocacy services provided by a rape  
25 crisis counselor whose communications are protected under  
26 Section 8-802.1 of the Code of Civil Procedure, if there

1 is a memorandum of understanding between the hospital or  
2 approved pediatric health care facility and a rape crisis  
3 center. With the consent of the sexual assault survivor, a  
4 rape crisis counselor shall remain in the exam room during  
5 the medical forensic examination.

6 (9) Written information regarding services provided by  
7 a Children's Advocacy Center and rape crisis center, if  
8 applicable.

9 (10) A treatment hospital, a treatment hospital with  
10 approved pediatric transfer, an out-of-state hospital as  
11 defined in Section 5.4, or an approved pediatric health  
12 care facility shall comply with the rules relating to the  
13 collection and tracking of sexual assault evidence adopted  
14 by the Department of State Police under Section 50 of the  
15 Sexual Assault Evidence Submission Act.

16 (11) Written information regarding the Illinois State  
17 Police sexual assault evidence tracking system.

18 (a-7) By January 1, 2023, every hospital with a treatment  
19 plan approved by the Department shall employ or contract with  
20 a qualified medical provider to initiate medical forensic  
21 services to a sexual assault survivor within 90 minutes of the  
22 patient presenting to the treatment hospital or treatment  
23 hospital with approved pediatric transfer. The provision of  
24 medical forensic services by a qualified medical provider  
25 shall not delay the provision of life-saving medical care.

26 (b) Any person who is a sexual assault survivor who seeks



1 medical forensic services or follow-up healthcare under this  
2 Act shall be provided such services without the consent of any  
3 parent, guardian, custodian, surrogate, or agent. If a sexual  
4 assault survivor is unable to consent to medical forensic  
5 services, the services may be provided under the Consent by  
6 Minors to Medical Procedures Act, the Health Care Surrogate  
7 Act, or other applicable State and federal laws.

8 (b-5) Every hospital, approved pediatric health care  
9 facility, or approved federally qualified health center  
10 providing medical forensic services to sexual assault  
11 survivors shall issue a voucher to any sexual assault survivor  
12 who is eligible to receive one in accordance with Section  
13 5.2-1 of this Act. The hospital, approved pediatric health  
14 care facility, or approved federally qualified health center  
15 shall make a copy of the voucher and place it in the medical  
16 record of the sexual assault survivor. The hospital, approved  
17 pediatric health care facility, or approved federally  
18 qualified health center shall provide a copy of the voucher to  
19 the sexual assault survivor after discharge upon request.

20 (c) Nothing in this Section creates a physician-patient  
21 relationship that extends beyond discharge from the hospital,  
22 or approved pediatric health care facility, or approved  
23 federally qualified health center.

24 (d) This Section is repealed on December 31, 2023.

25 (Source: P.A. 101-634, eff. 6-5-20; 102-22, eff. 6-25-21;  
26 102-674, eff. 11-30-21.)

1 (410 ILCS 70/5.4)

2 Sec. 5.4. Out-of-state hospitals.

3 (a) Nothing in this Section shall prohibit the transfer of  
4 a patient in need of medical services from a hospital that has  
5 been designated as a trauma center by the Department in  
6 accordance with Section 3.90 of the Emergency Medical Services  
7 (EMS) Systems Act.

8 (b) A transfer hospital, treatment hospital with approved  
9 pediatric transfer, or approved pediatric health care facility  
10 may transfer a sexual assault survivor to an out-of-state  
11 hospital that is located in a county that borders Illinois ~~has~~  
12 ~~been designated as a trauma center by the Department under~~  
13 ~~Section 3.90 of the Emergency Medical Services (EMS) Systems~~  
14 ~~Act~~ if the out-of-state hospital: (1) submits an areawide  
15 treatment plan approved by the Department; and (2) has  
16 certified the following to the Department in a form and manner  
17 prescribed by the Department that the out-of-state hospital  
18 will:

19 (i) consent to the jurisdiction of the Department in  
20 accordance with Section 2.06 of this Act;

21 (ii) comply with all requirements of this Act  
22 applicable to treatment hospitals, including, but not  
23 limited to, offering evidence collection to: (A) any  
24 Illinois sexual assault survivor 13 years of age or older  
25 who presents with a complaint of sexual assault within a

1 minimum of the last 7 days or who has disclosed past sexual  
2 assault by a specific individual and was in the care of  
3 that individual within a minimum of the last 7 days and not  
4 billing the sexual assault survivor for medical forensic  
5 services or 90 days of follow-up healthcare; and (B) any  
6 Illinois pediatric sexual assault survivor who presents  
7 with a complaint of sexual assault within a minimum of 96  
8 hours or who has disclosed past sexual assault by a  
9 specific individual and was in the care of that individual  
10 within a minimum of 96 hours and not billing the sexual  
11 assault survivor for medical forensic services or 90 days  
12 of follow-up healthcare;

13 (iii) use an Illinois State Police Sexual Assault  
14 Evidence Collection Kit to collect forensic evidence from  
15 an Illinois sexual assault survivor;

16 (iv) ensure its staff cooperates with Illinois law  
17 enforcement agencies and are responsive to subpoenas  
18 issued by Illinois courts; and

19 (v) provide appropriate transportation upon the  
20 completion of medical forensic services back to the  
21 transfer hospital or treatment hospital with pediatric  
22 transfer where the sexual assault survivor initially  
23 presented seeking medical forensic services, unless the  
24 sexual assault survivor chooses to arrange his or her own  
25 transportation.

26 (c) (Blank) Subsection (b) of this Section is inoperative

1 ~~on and after January 1, 2024.~~

2 (Source: P.A. 100-775, eff. 1-1-19.)".