



103RD GENERAL ASSEMBLY

State of Illinois

2023 and 2024

HB4172

by Rep. Jehan Gordon-Booth

SYNOPSIS AS INTRODUCED:

New Act

Creates the Deveraux Hubbard II Blood Clot Prevention and Treatment Act. Requires the Department of Public Health to carry out projects to increase education, awareness, or diagnosis of deep venous thrombosis or pulmonary embolism and to reduce the incidence of morbidity and mortality caused by blood clots. Requires the Director of Public Health to establish the Advisory Committee for Deep Venous Thrombosis or Pulmonary Embolism Prevention. Sets forth the Advisory Committee's duties, membership, reporting requirements, and termination of the Advisory Committee. Requires the Department to conduct or support a study on model systems of deep venous thrombosis or pulmonary embolism surveillance and submit a report to the General Assembly detailing the results of the study.

LRB103 34770 LNS 64620 b

1 AN ACT concerning health.

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

4 Section 1. Short title. This Act may be cited as the
5 Deveraux Hubbard II Blood Clot Prevention and Treatment Act.

6 Section 5. Prevention of morbidity and mortality as a
7 result of deep venous thromboembolism.

8 (a) The Department of Public Health shall carry out
9 projects to increase education, awareness, or diagnosis of
10 deep venous thrombosis or pulmonary embolism and to reduce the
11 incidence of morbidity and mortality caused by blood clots.
12 The projects may be carried out by the Department directly or
13 through awards of grants or contracts to public or nonprofit
14 private entities. The Department may directly, or through
15 awards or grants, provide technical assistance with respect to
16 the planning, development, and operation of the projects.

17 (b) A project under this Section may include:

18 (1) the implementation of public information and
19 education programs for:

20 (A) the prevention of death from deep venous
21 thrombosis or pulmonary embolism;

22 (B) broadening the awards of the public
23 concerning:

1 (i) the risk factors for and the symptoms of
2 deep venous thrombosis or pulmonary embolism;

3 (ii) target populations with greater risk for
4 deep venous thrombosis or pulmonary embolism,
5 including women, seniors, cancer patients,
6 hospitalized patients, pregnant and postpartum
7 women, Black Americans, and those in rural areas;
8 and

9 (iv) the public health consequences of deep
10 venous thrombosis or pulmonary embolism; and

11 (C) increasing screening, detection, and diagnosis
12 of deep venous thrombosis or pulmonary embolism; and

13 (2) surveillance of the prevalence and incidence of
14 deep venous thrombosis or pulmonary embolism to improve
15 patient outcomes.

16 (c) The Department may, in awarding grants or entering
17 into contracts under this Section, give priority to entities
18 seeking to carry out projects that target the populations
19 referred to in item (ii) of subparagraph (B) of paragraph (1)
20 of subsection (b).

21 (d) The Department shall ensure that projects carried out
22 under this Section are coordinated, as appropriate, with other
23 agencies that carry out activities regarding deep venous
24 thrombosis or pulmonary embolism.

25 (e) The Department shall:

26 (1) collect and analyze the findings of research

1 conducted with respect to deep venous thrombosis or
2 pulmonary embolism; and

3 (2) taking into account such findings, publish on the
4 Department's website the best practices for physicians and
5 other health care providers who provide care to individuals
6 with deep venous thrombosis or pulmonary embolism.

7 Section 10. Advisory Committee for Deep Venous Thrombosis
8 or Pulmonary Embolism Prevention.

9 (a) Not later than 180 days after the effective date of
10 this Act, the Director of Public Health shall establish an
11 advisory committee to be known as the Advisory Committee for
12 Deep Venous Thrombosis or Pulmonary Embolism Prevention.

13 (b) The Advisory Committee shall:

14 (1) identify the aggregate number of individuals in
15 the State who experience deep venous thrombosis or
16 pulmonary embolism annually;

17 (2) identify how data are collected regarding deep
18 venous thrombosis or pulmonary embolism and the adverse
19 outcomes associated with such conditions;

20 (3) identify how deep venous thrombosis or pulmonary
21 embolism impacts the lives of individuals in the State;

22 (4) identify the standard of care for deep venous
23 thrombosis or pulmonary embolism surveillance, detection,
24 and treatment;

25 (5) identify emerging treatments, therapies, and

1 research relating to deep venous thrombosis or pulmonary
2 embolism;

3 (6) develop recommendations to help health care
4 providers identify patients who may be at a higher risk of
5 forming deep venous thrombosis or pulmonary embolism in
6 health care facilities;

7 (7) develop recommendations to help improve patient
8 awareness of deep venous thrombosis or pulmonary embolism;

9 (8) develop recommendations with respect to the
10 standard of care for patients at risk of forming deep
11 venous thrombosis or pulmonary embolism;

12 (9) develop recommendations relating to providing
13 patients and their families with written notice of
14 increased risks of forming deep venous thrombosis or
15 pulmonary embolism; and

16 (10) identify the estimated level of State funding
17 needed for deep venous thrombosis or pulmonary embolism
18 services to met the needs of high-risk populations.

19 (c) The Advisory Committee shall be composed of members
20 appointed by the Director as follows:

21 (1) at least one individual who has experienced blood
22 clots;

23 (2) at least one family member of an individual who
24 died from deep venous thrombosis or pulmonary embolism;

25 (3) at least one health services researcher;

26 (4) at least one health care provider;

- 1 (5) at least one representative of a health plan;
- 2 (6) at least one representative of a hospital or
3 health system;
- 4 (7) at least one epidemiologist;
- 5 (8) at least one public health expert;
- 6 (9) at least one patient representative or
7 representative of a patient group;
- 8 (10) at least one physician licensed to practice
9 medicine in all its branches and who represents a
10 statewide organization of physicians; and
- 11 (11) such individuals representing other interested
12 parties or associations, as the Director determines
13 appropriate.
- 14 (d) Not later than 18 months after the first meeting of the
15 Advisory Committee, the Director shall submit to the General
16 Assembly, and make publicly available, a report:
- 17 (1) summarizing the meetings and findings of the
18 Advisory Committee; and
- 19 (2) describing the recommendations of the Advisory
20 Committee for legislative and administrative action to
21 improve deep venous thrombosis or pulmonary embolism
22 prevention, treatment, and diagnosis, including the
23 recommendations described in paragraphs (6) through (9) of
24 subsection (b).
- 25 (e) The Advisory Committee shall terminate on the earlier
26 of:

1 (1) the date on which the Director submits the report
2 under subsection (d); or

3 (2) the date that is 18 months after the first meeting
4 of the Advisory Committee.

5 Section 15. Deep venous thrombosis or pulmonary embolism
6 surveillance study and report.

7 (a) The Department of Public Health shall conduct or
8 support a study on model systems of deep venous thrombosis or
9 pulmonary embolism surveillance, including the use of
10 electronic medical record-based methods of detecting deep
11 venous thrombosis and pulmonary embolism International
12 Classification of Diseases codes or other population-based
13 surveillance.

14 (b) Not later than one year after the effective date of
15 this Act, the Department shall submit to the General Assembly
16 and the Advisory Committee for Deep Venous Thrombosis or
17 Pulmonary Embolism a report detailing the results of the study
18 under subsection (a).