



93RD GENERAL ASSEMBLY
State of Illinois
2003 and 2004
SB2424

Introduced 2/3/2004, by Debbie DeFrancesco Halvorson

SYNOPSIS AS INTRODUCED:

20 ILCS 2310/2310-353 new

Amends the Department of Public Health Powers and Duties Law of the Civil Administrative Code of Illinois. Creates the Cervical Cancer Elimination Task Force within the Department of Public Health. Requires the task force to examine the prevalence and burden of cervical cancer, raise public awareness concerning the causes and nature of cervical cancer, identify prevention and control strategies and technologies, and perform other functions. Requires the task force to develop a statewide comprehensive cervical cancer prevention plan and to make annual reports. Provides for expiration of the task force on April 1, 2009 or upon the task force's submission of its final report, whichever is earlier. Effective immediately.

LRB093 20684 DRJ 46553 b

FISCAL NOTE ACT
MAY APPLY

A BILL FOR

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 5. The Department of Public Health Powers and
5 Duties Law of the Civil Administrative Code of Illinois is
6 amended by adding Section 2310-353 as follows:

7 (20 ILCS 2310/2310-353 new)

8 Sec. 2310-353. Cervical Cancer Elimination Task Force.

9 (a) A standing ad hoc task force on cervical cancer
10 elimination is established within the Department of Public
11 Health. The task force shall be called the Cervical Cancer
12 Elimination Task Force ("the Task Force"). The Task Force shall
13 perform the duties specified in this Section.

14 (b) The Task Force shall have 21 members. The directors of
15 Public Health, Public Aid, and Human Services and the Chair and
16 Vice-Chair of the Conference of Women Legislators in Illinois,
17 or their designees, shall be ex officio members of the Task
18 Force. The following additional members shall be appointed:

19 (1) By the President of the Senate, as follows:

20 (A) One member of the Senate.

21 (B) A representative of a women's health
22 organization.

23 (C) A representative from the American Academy of
24 Pediatrics.

25 (D) A certified schoolteacher.

26 (2) By the Minority Leader of the Senate: one member of
27 the Senate.

28 (3) By the Speaker of the House of Representatives, as
29 follows:

30 (A) One member of the House of Representatives.

31 (B) A member of the Illinois Chapter of the
32 American Cancer Society who is an oncologist.

1 (C) A member of the health insurance industry.

2 (D) A member from the American College of
3 Obstetrics and Gynecology.

4 (4) By the Minority Leader of the House of
5 Representatives: one member of the House of
6 Representatives.

7 (5) By the Governor, as follows:

8 (A) A member of the American Academy of Family
9 Physicians.

10 (B) The State Epidemiologist.

11 (C) Two members at large.

12 (D) A news director of a newspaper or television or
13 radio station.

14 (E) A licensed registered nurse.

15 The Governor shall appoint a Chair from among the members
16 of the Task Force. The Task Force shall elect a Vice-Chair from
17 its members.

18 (c) Each appointing authority shall ensure, insofar as
19 possible, that its appointees to the Task Force reflect the
20 composition of the Illinois population with regard to ethnic,
21 racial, age, and religious composition.

22 (d) The appointing authorities shall make their
23 appointments to the Task Force not later than 30 days after the
24 effective date of this amendatory Act of the 93rd General
25 Assembly. In the case of a vacancy on the Task Force, the
26 original appointing authority, using the criteria set forth in
27 this Section for the original appointment, shall fill the
28 vacancy.

29 (e) The Task Force shall meet at least quarterly or more
30 frequently at the call of the Chair.

31 (f) The Task Force Chair may establish committees for the
32 purpose of making special studies pursuant to its duties and
33 may appoint non-Task-Force members to serve on each committee
34 as resource persons. Resource persons shall be voting members
35 of the committees. Committees may meet with the frequency
36 needed to accomplish the purposes of this Section.

1 (g) Members of the Task Force are entitled to a per diem
2 and reimbursement for their necessary travel and subsistence
3 expenses incurred in performing their duties.

4 (h) A majority of the Task Force shall constitute a quorum
5 for the transaction of its business.

6 (i) The Task Force shall have the following duties:

7 (1) To obtain from the Department of Public Health, if
8 available, the Department's review of statistical and
9 qualitative data on the prevalence and burden of cervical
10 cancer. If such a review is not available from the
11 Department, the Task Force shall undertake such a review.

12 (2) To raise public awareness on the causes and nature
13 of cervical cancer, personal risk factors, the value of
14 prevention, early detection, options for testing,
15 treatment costs, new technology, medical care
16 reimbursement, and physician education.

17 (3) To identify priority strategies, new technologies,
18 or newly introduced vaccines that are effective in
19 preventing and controlling the risk of cervical cancer.

20 (4) To identify and examine the limitations of existing
21 laws, regulations, programs, and services with regard to
22 coverage and awareness issues for cervical cancer,
23 including requiring insurance or other coverage for PAP
24 smears and mammograms in accordance with the most recently
25 published American Cancer Society guidelines.

26 (5) To develop a statewide comprehensive Cervical
27 Cancer Prevention Plan and strategies for implementing the
28 Plan and for promoting the Plan to the general public,
29 State and local elected officials, and various public and
30 private organizations, associations, businesses,
31 industries, and agencies.

32 (6) To identify strategies to facilitate specific
33 commitments to help implement the Cervical Cancer
34 Prevention Plan from the entities listed in paragraph (8).

35 (7) To facilitate coordination of and communication
36 between State and local agencies and organizations

1 regarding current or future involvement in achieving the
2 aims of the Cervical Cancer Prevention Plan.

3 (8) To receive and to consider reports and testimony
4 from individuals, local health departments,
5 community-based organizations, voluntary health
6 organizations, and other public and private organizations
7 statewide to learn more about their contributions to
8 cervical cancer diagnosis, prevention, and treatment and
9 more about their ideas for improving cervical cancer
10 prevention, diagnosis, and treatment in Illinois.

11 (j) On or before April 1, 2005, and on or before April 1
12 each year thereafter, the Task Force shall submit a report to
13 the Governor and the General Assembly. Each annual report shall
14 address the following:

15 (1) The progress being made in fulfilling the duties of
16 the Task Force and in developing the Cervical Cancer
17 Prevention Plan.

18 (2) The anticipated time frame for completion of the
19 Cervical Cancer Prevention Plan.

20 (3) Recommended strategies or actions to reduce the
21 occurrence of and burdens suffered from cervical cancer by
22 citizens of this State.

23 (k) The Task Force shall expire on April 1, 2009, or upon
24 submission of the Task Force's final report to the Governor and
25 the General Assembly, whichever occurs earlier.

26 (l) The Department of Public Health shall use moneys
27 appropriated to it to implement this Section.

28 Section 99. Effective date. This Act takes effect upon
29 becoming law.