



95TH GENERAL ASSEMBLY

State of Illinois

2007 and 2008

SB1618

Introduced 2/9/2007, by Sen. Jeffrey M. Schoenberg

SYNOPSIS AS INTRODUCED:

See Index

Amends the Sexual Assault Survivors Emergency Treatment Act. Deletes the definition of sexual assault. Deletes references in the Act to "hospital emergency services" and replaces it with "(i) transfer services or (ii) hospital emergency services and forensic services". Provides that if a surveyor from the Department of Public Health determines that the hospital is not in compliance with its approved plan to provide transfer services or hospital emergency services and forensic services, the surveyor shall provide the hospital with a written list of the specific items of noncompliance within 10 working days after the conclusion of the surveyor's on site review (now, 2 weeks). Provides that the hospital shall have 10 working days to submit to the Department a plan of correction that contains the hospital's specific proposals for correcting the items of noncompliance (now, 14 working days). Creates a provision allowing for hospitals in the area to be served to develop and participate in areawide plans. Sets out the minimum requirements for hospitals providing hospital emergency services and forensic services. Creates a Section concerning minimum reimbursement requirements for every hospital, health care professional, laboratory, or pharmacy that provides follow-up healthcare to a sexual assault survivor. Provides that when certain entities provide services to a sexual assault survivor who is not eligible to receive such services under the Public Aid Code or insurance policy, the entity shall furnish such services without charge and be entitled to reimbursement for billed charges by the Illinois Sexual Assault Emergency Treatment Program. Repeals a Section concerning community or areawide plans and Sections concerning the powers and duties of the Department of Public Health and the Department of Public Aid. Makes other changes.

LRB095 11040 KBJ 31360 b

1 AN ACT concerning public health.

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

4 Section 5. The Sexual Assault Survivors Emergency
5 Treatment Act is amended by adding Section 5.5 and by changing
6 Sections 1a, 2, 2.1, 2.2, 3, 5, 6.1, 6.2, 6.4, and 7 as
7 follows:

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

9 Sec. 1a. Definitions. In this Act:

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

14 "Areawide sexual assault treatment plan" means a plan,
15 developed by the hospitals in the community or area to be
16 served, which provides for hospital emergency services to
17 sexual assault survivors that shall be made available by each
18 of the participating hospitals.

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.

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

5 "Forensic services" means the collection of evidence
6 pursuant to a statewide sexual assault evidence collection
7 program administered by the Department of State Police, using
8 the Illinois State Police Sexual Assault Evidence Collection
9 Kit.

10 "Health care professional" means a physician, a physician
11 assistant, or an advanced practice nurse.

12 "Hospital" has the meaning given to that term in the
13 Hospital Licensing Act.

14 "Hospital emergency services" means healthcare delivered
15 to outpatients within or under the care and supervision of
16 personnel working in a designated emergency department of a
17 hospital, including, but not limited to, care ordered by such
18 personnel for a sexual assault survivor in the emergency
19 department.

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

26 "Nurse" means a nurse licensed under the Nursing and

1 Advanced Practice Nursing Act.

2 "Physician" means a person licensed to practice medicine in
3 all its branches.

4 "Sexual assault" means an act of nonconsensual sexual
5 conduct or sexual penetration, as defined in Section 12-12 of
6 the Criminal Code of 1961, including, without limitation, acts
7 prohibited under Sections 12-13 through 12-16 of the Criminal
8 Code of 1961.

9 "Sexual assault survivor" means a person who presents for
10 hospital emergency services in relation to injuries or trauma
11 resulting from a sexual assault.

12 "Sexual assault transfer plan" means a written plan
13 developed by a hospital and approved by the Department, which
14 describes the hospital's procedures for transferring sexual
15 assault survivors to another hospital in order to receive
16 emergency treatment.

17 "Sexual assault treatment plan" means a written plan
18 developed by a hospital that describes the hospital's
19 procedures and protocols for providing hospital emergency
20 services and forensic services to sexual assault survivors who
21 present themselves for such services, either directly or
22 through transfer from another hospital.

23 "Transfer services" means the appropriate medical
24 screening examination and necessary stabilizing treatment
25 prior to the transfer of a sexual assault survivor to a
26 hospital that provides hospital emergency services and

1 forensic services to sexual assault survivors pursuant to a
2 sexual assault treatment plan or areawide sexual assault
3 treatment plan.

4 ~~Sexual assault means an act of forced sexual penetration or~~
5 ~~sexual conduct, as defined in Section 12-12 of the Criminal~~
6 ~~Code, including acts prohibited under Sections 12-13 through~~
7 ~~12-16 of the Criminal Code of 1961, as amended.~~

8 (Source: P.A. 85-577.)

9 (410 ILCS 70/2) (from Ch. 111 1/2, par. 87-2)

10 Sec. 2. Hospital requirements. ~~Hospitals to furnish~~
11 ~~emergency service.~~ Every hospital required to be licensed by
12 the Department ~~of Public Health~~ pursuant to the Hospital
13 Licensing Act, approved July 1, 1953, as now or hereafter
14 amended, which provides general medical and surgical hospital
15 services shall provide either (i) transfer services or (ii)
16 hospital emergency services and forensic services ~~emergency~~
17 ~~hospital service~~, in accordance with rules and regulations
18 adopted by the Department ~~of Public Health~~, to all ~~alleged~~
19 sexual assault survivors who apply for either (i) transfer
20 services or (ii) hospital emergency services and forensic
21 services ~~such hospital emergency services~~ in relation to
22 injuries or trauma resulting from the sexual assault.

23 In addition, every such hospital, regardless of whether or
24 not a request is made for reimbursement, ~~except hospitals~~
25 ~~participating in community or area wide plans in compliance~~

1 ~~with Section 4 of this Act,~~ shall submit to the Department ~~of~~
2 ~~Public Health~~ a plan to provide either (i) transfer services or
3 (ii) hospital emergency services and forensic services
4 ~~hospital emergency services~~ to ~~alleged~~ sexual assault
5 survivors ~~which shall be made available by such hospital~~. Such
6 plan shall be submitted within 60 days after ~~of~~ receipt of the
7 Department's request for this plan, to the Department ~~of Public~~
8 ~~Health~~ for approval prior to such plan becoming effective. The
9 Department ~~of Public Health~~ shall approve such plan for either
10 (i) transfer services or (ii) hospital emergency services and
11 forensic services ~~emergency service~~ to ~~alleged~~ sexual assault
12 survivors if it finds that the implementation of the proposed
13 plan would provide adequate (i) transfer services or (ii)
14 hospital emergency services and forensic services ~~hospital~~
15 ~~emergency service~~ for ~~alleged~~ sexual assault survivors and
16 provide sufficient protections from the risk of pregnancy to ~~by~~
17 sexual assault survivors.

18 The Department ~~of Public Health~~ shall periodically conduct
19 on site reviews of such approved plans with hospital personnel
20 to insure that the established procedures are being followed.

21 On January 1, 2007, and each January 1 thereafter, the
22 Department shall submit a report to the General Assembly
23 containing information on the hospitals in this State that have
24 submitted a plan to provide either (i) transfer services or
25 (ii) hospital emergency services and forensic services
26 ~~hospital emergency services~~ to sexual assault survivors. The

1 Department shall post on its Internet website the report
2 required in this Section. The report shall include all of the
3 following:

4 (1) A list of all hospitals that have submitted a plan.

5 (2) A list of hospitals whose plans have been found by
6 the Department to be in compliance with this Act.

7 (3) A list of hospitals that have failed to submit an
8 acceptable Plan of Correction within the time required by
9 Section 2.1 of this Act.

10 (4) A list of hospitals at which the periodic site
11 review required by this Act has been conducted.

12 When a hospital listed as noncompliant under item (3) of this
13 Section submits and implements the required Plan of Correction,
14 the Department shall immediately update the report on its
15 Internet website to reflect that hospital's compliance.

16 (Source: P.A. 94-762, eff. 5-12-06.)

17 (410 ILCS 70/2.1) (from Ch. 111 1/2, par. 87-2.1)

18 Sec. 2.1. Plan of correction; penalties. ~~Plans of~~
19 ~~correction — Penalties for failure to implement such plans.~~ If
20 the Department ~~of Public Health~~ surveyor determines that the
21 hospital is not in compliance with its approved plan, the
22 surveyor shall provide the hospital with a written list of the
23 specific items of noncompliance within 10 working days after 2
24 ~~weeks of~~ the conclusion of the on site review. The hospital
25 shall have 10 ~~14~~ working days to submit to the Department ~~of~~

1 ~~Public Health~~ a plan of correction which contains the
2 hospital's specific proposals for correcting the items of
3 noncompliance. The Department ~~of Public Health~~ shall review the
4 plan of correction and notify the hospital in writing within 10
5 working days as to whether the plan is acceptable or
6 unacceptable ~~nonacceptable~~.

7 If the Department ~~of Public Health~~ finds the Plan of
8 Correction unacceptable ~~nonacceptable~~, the hospital shall have
9 10 ~~7~~ working days to resubmit an acceptable Plan of Correction.
10 Upon notification that its Plan of Correction is acceptable, a
11 hospital shall implement the Plan of Correction within 60 days.

12 The failure to submit an acceptable Plan of Correction or
13 to implement the Plan of Correction, within the time frames
14 required in this Section, will subject a hospital to the
15 imposition of a fine by the Department ~~of Public Health~~. The
16 Department ~~of Public Health~~ may impose a fine of up to \$500 per
17 day until a hospital complies with the requirements of this
18 Section.

19 Before imposing a fine pursuant to this Section, the
20 Department ~~of Public Health~~ shall provide the hospital via
21 certified mail with written notice and an opportunity for an
22 administrative hearing. Such hearing must be requested within
23 10 working days after ~~of~~ receipt of the Department's ~~Department~~
24 ~~of Public Health's~~ Notice. All hearings shall be conducted in
25 accordance with the Department's ~~Department of Public Health's~~
26 rules in administrative hearings.

1 (Source: P.A. 94-762, eff. 5-12-06.)

2 (410 ILCS 70/2.2)

3 Sec. 2.2. Emergency contraception.

4 (a) The General Assembly finds:

5 (1) Crimes of sexual assault and sexual abuse ~~violence~~
6 cause significant physical, emotional, and psychological
7 trauma to the victims. This trauma is compounded by a
8 victim's fear of becoming pregnant and bearing a child as a
9 result of the sexual assault.

10 (2) Each year over 32,000 women become pregnant in the
11 United States as the result of rape and approximately 50%
12 of these pregnancies end in abortion.

13 (3) As approved for use by the Federal Food and Drug
14 Administration (FDA), emergency contraception can
15 significantly reduce the risk of pregnancy if taken within
16 72 hours after the sexual assault.

17 (4) By providing emergency contraception to rape
18 victims in a timely manner, the trauma of rape can be
19 significantly reduced.

20 (b) Within 120 days after the effective date of this
21 amendatory Act of the 92nd General Assembly, every hospital
22 providing services to ~~alleged~~ sexual assault survivors in
23 accordance with a plan approved under Section 2 must develop a
24 protocol that ensures that each survivor of sexual assault will
25 receive medically and factually accurate and written and oral

1 information about emergency contraception; the indications and
2 counter-indications and risks associated with the use of
3 emergency contraception; and a description of how and when
4 victims may be provided emergency contraception upon the
5 written order of a physician licensed to practice medicine in
6 all its branches, an advanced practice nurse who has a written
7 collaborative agreement with a collaborating physician that
8 authorizes prescription of emergency contraception, or a
9 physician assistant who has been delegated authority to
10 prescribe emergency contraception. The Department shall
11 approve the protocol if it finds that the implementation of the
12 protocol would provide sufficient protection for survivors of
13 ~~an alleged~~ sexual assault.

14 The hospital shall implement the protocol upon approval by
15 the Department. The Department shall adopt rules and
16 regulations establishing one or more safe harbor protocols and
17 setting minimum acceptable protocol standards that hospitals
18 may develop and implement. The Department shall approve any
19 protocol that meets those standards. The Department may provide
20 a sample acceptable protocol upon request.

21 (Source: P.A. 92-156, eff. 1-1-02; 93-962, eff. 8-20-04.)

22 (410 ILCS 70/3) (from Ch. 111 1/2, par. 87-3)

23 Sec. 3. Areawide sexual assault treatment plans;
24 submission. Hospitals in the area to be served may develop and
25 participate in areawide plans that shall describe the hospital

1 emergency services and forensic services to sexual assault
2 survivors that each participating hospital has agreed to make
3 available. Each hospital participating in such a plan shall
4 provide such services as it is designated to provide in the
5 plan agreed upon by the participants. Areawide plans may
6 include hospital transfer plans. All areawide plans shall be
7 submitted to the Department for approval, prior to becoming
8 effective. The Department shall approve a proposed plan if it
9 finds that the implementation of the plan would provide for
10 appropriate hospital emergency services and forensic services
11 for the people of the area to be served. Community or areawide
12 plan for emergency services to sexual assault survivors. A
13 hospital is authorized to participate, in conjunction with one
14 or more other hospitals or health care facilities, in a
15 community or areawide plan for the furnishing of hospital
16 emergency service to alleged sexual assault survivors on a
17 community or areawide basis provided each hospital
18 participating in such a plan shall furnish such hospital
19 emergency services as it is designated to provide in the plan
20 agreed upon by the participating hospitals to any alleged
21 sexual assault survivor who applies for such hospital emergency
22 services in relation to injuries or trauma resulting from the
23 sexual assault.

24 (Source: P.A. 85-577.)

25 (410 ILCS 70/5) (from Ch. 111 1/2, par. 87-5)

1 Sec. 5. Minimum requirements for hospitals providing
2 hospital emergency services and forensic services ~~emergency~~
3 ~~service~~ to sexual assault survivors.

4 (a) Every hospital providing hospital emergency services
5 and forensic services ~~emergency hospital services~~ to ~~an alleged~~
6 sexual assault survivors ~~survivor~~ under this Act shall, as
7 minimum requirements for such services, provide, with the
8 consent of the ~~alleged~~ sexual assault survivor, and as ordered
9 by the attending physician, an advanced practice nurse who has
10 a written collaborative agreement with a collaborating
11 physician that authorizes provision of emergency services, or a
12 physician assistant who has been delegated authority to provide
13 hospital emergency services and forensic services ~~emergency~~
14 ~~services~~, the following:

15 (1) appropriate medical examinations and laboratory
16 tests required to ensure the health, safety, and welfare of
17 a ~~an alleged~~ sexual assault survivor or which may be used
18 as evidence in a criminal proceeding against a person
19 accused of the sexual assault, or both; and records of the
20 results of such examinations and tests shall be maintained
21 by the hospital and made available to law enforcement
22 officials upon the request of the ~~alleged~~ sexual assault
23 survivor;

24 (2) appropriate oral and written information
25 concerning the possibility of infection, sexually
26 transmitted disease and pregnancy resulting from sexual

1 assault;

2 (3) appropriate oral and written information
3 concerning accepted medical procedures, medication, and
4 possible contraindications of such medication available
5 for the prevention or treatment of infection or disease
6 resulting from sexual assault;

7 (4) an amount of ~~such~~ medication for treatment at the
8 hospital and after discharge as is deemed appropriate by
9 the attending physician, an advanced practice nurse, or a
10 physician assistant and consistent with the hospital's
11 current approved protocol for sexual assault survivors; ~~7~~
12 ~~including HIV prophylaxis;~~

13 (5) an evaluation of the sexual assault survivor's risk
14 of contracting human immunodeficiency virus (HIV) from the
15 sexual assault ~~a blood test to determine the presence or~~
16 ~~absence of sexually transmitted disease;~~

17 (6) written and oral instructions indicating the need
18 for follow-up examinations and laboratory tests ~~a second~~
19 ~~blood test 6 weeks~~ after the sexual assault to determine
20 the presence or absence of sexually transmitted disease;
21 ~~and~~

22 (7) referral by hospital personnel for appropriate
23 counseling; ~~and as determined by the hospital, by trained~~
24 ~~personnel designated by the hospital.~~

25 (8) when HIV prophylaxis is deemed appropriate, an
26 initial dose or doses of HIV prophylaxis, along with

1 written and oral instructions indicating the importance of
2 timely follow-up healthcare.

3 (b) Any minor who is a sexual assault survivor ~~an alleged~~
4 ~~survivor of sexual assault~~ who seeks emergency hospital
5 services and forensic services or follow-up healthcare
6 ~~emergency services~~ under this Act shall be provided such
7 services without the consent of the parent, guardian or
8 custodian of the minor.

9 (c) Nothing in this Section creates a physician-patient
10 relationship that extends beyond discharge from the hospital
11 emergency department.

12 (Source: P.A. 93-962, eff. 8-20-04; 94-434, eff. 1-1-06.)

13 (410 ILCS 70/5.5 new)

14 Sec. 5.5. Minimum reimbursement requirements for follow-up
15 healthcare.

16 (a) Every hospital, health care professional, laboratory,
17 or pharmacy that provides follow-up healthcare to a sexual
18 assault survivor, with the consent of the sexual assault
19 survivor and as ordered by the attending physician, an advanced
20 practice nurse who has a written collaborative agreement with a
21 collaborating physician, or physician assistant who has been
22 delegated authority by a supervising physician shall be
23 reimbursed for the follow-up healthcare services provided.
24 Follow-up healthcare services include, but are not limited to,
25 the following:

1 (1) a physical examination;
2 (2) laboratory tests to determine the presence or
3 absence of sexually transmitted disease; and
4 (3) appropriate medications, including HIV
5 prophylaxis.

6 (b) Reimbursable follow-up healthcare is limited to office
7 visits with a physician, advanced practice nurse, or physician
8 assistant within 90 days after an initial visit for hospital
9 emergency services.

10 (c) Nothing in this Section requires a hospital, health
11 care professional, laboratory, or pharmacy to provide
12 follow-up healthcare to a sexual assault survivor.

13 (410 ILCS 70/6.1) (from Ch. 111 1/2, par. 87-6.1)

14 Sec. 6.1. Minimum standards. The Department shall ~~To~~
15 prescribe minimum standards, rules, and regulations necessary
16 to implement this Act, which shall apply to every hospital
17 required to be licensed by the Department that provides general
18 medical and surgical hospital services ~~of Public Health~~. Such
19 standards shall include, but not be limited to, a uniform
20 system for recording results of medical examinations and all
21 diagnostic tests performed in connection therewith to
22 determine the condition and necessary treatment of ~~alleged~~
23 sexual assault survivors, which results shall be preserved in a
24 confidential manner as part of the hospital record of the
25 sexual assault survivor patient.

1 (Source: P.A. 89-507, eff. 7-1-97.)

2 (410 ILCS 70/6.2) (from Ch. 111 1/2, par. 87-6.2)

3 Sec. 6.2. Assistance and grants. The Department shall ~~to~~
4 assist in the development and operation of programs which
5 provide hospital emergency services and forensic services
6 ~~emergency services~~ to alleged sexual assault survivors, and,
7 where necessary, to provide grants to hospitals for this
8 purpose.

9 (Source: P.A. 85-577.)

10 (410 ILCS 70/6.4) (from Ch. 111 1/2, par. 87-6.4)

11 Sec. 6.4. Sexual assault evidence collection program.

12 (a) There is created a statewide sexual assault evidence
13 collection program to facilitate the prosecution of persons
14 accused of sexual assault. This program shall be administered
15 by the Illinois State Police. The program shall consist of the
16 following: (1) distribution of sexual assault evidence
17 collection kits which have been approved by the Illinois State
18 Police to hospitals that request them, or arranging for such
19 distribution by the manufacturer of the kits, (2) collection of
20 the kits from hospitals after the kits have been used to
21 collect evidence, (3) analysis of the collected evidence and
22 conducting of laboratory tests, (4) maintaining the chain of
23 custody and safekeeping of the evidence for use in a legal
24 proceeding, and (5) the comparison of the collected evidence

1 with the genetic marker grouping analysis information
2 maintained by the Department of State Police under Section
3 5-4-3 of the Unified Code of Corrections and with the
4 information contained in the Federal Bureau of Investigation's
5 National DNA database; provided the amount and quality of
6 genetic marker grouping results obtained from the evidence in
7 the sexual assault case meets the requirements of both the
8 Department of State Police and the Federal Bureau of
9 Investigation's Combined DNA Index System (CODIS) policies.
10 The standardized evidence collection kit for the State of
11 Illinois shall be the Illinois State Police Sexual Assault
12 Evidence Kit ~~State Police Evidence Collection Kit, also known~~
13 ~~as "S.P.E.C.K."~~. A sexual assault evidence collection kit may
14 not be released by a hospital without the written consent of
15 the sexual assault survivor. In the case of a survivor who is a
16 minor 13 years of age or older, evidence and information
17 concerning the ~~alleged~~ sexual assault may be released at the
18 written request of the minor. If the survivor is a minor who is
19 under 13 years of age, evidence and information concerning the
20 alleged sexual assault may be released at the written request
21 of the parent, guardian, investigating law enforcement
22 officer, or Department of Children and Family Services. Any
23 health care professional, including any physician, advanced
24 practice nurse, physician assistant, or nurse, sexual assault
25 nurse examiner, and any health care institution, including any
26 hospital, who provides evidence or information to a law

1 enforcement officer pursuant to a written request as specified
2 in this Section is immune from any civil or professional
3 liability that might arise from those actions, with the
4 exception of willful or wanton misconduct. The immunity
5 provision applies only if all of the requirements of this
6 Section are met.

7 (a-5) All sexual assault evidence collected using the State
8 Police Evidence Collection Kits before January 1, 2005 (the
9 effective date of Public Act 93-781) ~~this amendatory Act of the~~
10 ~~93rd General Assembly~~ that have not been previously analyzed
11 and tested by the Department of State Police shall be analyzed
12 and tested within 2 years after receipt of all necessary
13 evidence and standards into the State Police Laboratory if
14 sufficient staffing and resources are available. All sexual
15 assault evidence collected using the State Police Evidence
16 Collection Kits on or after January 1, 2005 (the effective date
17 of Public Act 93-781) ~~this amendatory Act of the 93rd General~~
18 ~~Assembly~~ shall be analyzed and tested by the Department of
19 State Police within one year after receipt of all necessary
20 evidence and standards into the State Police Laboratory if
21 sufficient staffing and resources are available.

22 (b) The Illinois State Police shall administer a program to
23 train hospitals and hospital personnel participating in the
24 sexual assault evidence collection program, in the correct use
25 and application of the sexual assault evidence collection kits.
26 A sexual assault nurse examiner may conduct examinations using

1 the sexual assault evidence collection kits, without the
2 presence or participation of a physician. The Department ~~of~~
3 ~~Public Health~~ shall cooperate with the Illinois State Police in
4 this program as it pertains to medical aspects of the evidence
5 collection.

6 (c) In this Section, "sexual assault nurse examiner" means
7 a registered nurse who has completed a sexual assault nurse
8 examiner (SANE) training program that meets the Forensic Sexual
9 Assault Nurse Examiner Education Guidelines established by the
10 International Association of Forensic Nurses.

11 (Source: P.A. 92-514, eff. 1-1-02; 93-781, eff. 1-1-05; 93-962,
12 eff. 8-20-04; revised 10-14-04.)

13 (410 ILCS 70/7) (from Ch. 111 1/2, par. 87-7)

14 Sec. 7. Charges ~~Hospital charges~~ and reimbursement. When
15 any ambulance provider furnishes transportation, hospital
16 provides hospital emergency services and forensic services,
17 hospital or health care professional or laboratory provides
18 follow-up healthcare, or pharmacy dispenses prescribed
19 medications ~~hospital or ambulance provider furnishes emergency~~
20 ~~services~~ to any ~~alleged~~ sexual assault survivor, as defined by
21 the Department of Healthcare and Family Services ~~Public Aid~~
22 ~~pursuant to Section 6.3 of this Act~~, who is neither eligible to
23 receive such services under the Illinois Public Aid Code nor
24 covered as to such services by a policy of insurance, the
25 ~~hospital and ambulance provider,~~ hospital, health care

1 professional, or laboratory shall furnish such services to that
2 person without charge and shall be entitled to be reimbursed
3 for its billed charges in providing such services by the
4 Illinois Sexual Assault Emergency Treatment Program under the
5 Department of Healthcare and Family Services ~~Public Aid.~~
6 Pharmacies shall dispense prescribed medications without
7 charge to the survivor and shall be reimbursed at the
8 Department of Healthcare and Family Services' Medicaid
9 allowable rates.

10 (b) The hospital is responsible for submitting the request
11 for reimbursement for ambulance services, hospital emergency
12 services, and forensic services to the Illinois Sexual Assault
13 Emergency Treatment Program. Nothing in this Section precludes
14 hospitals from providing follow-up healthcare and receiving
15 reimbursement under this Section.

16 (c) The health care professional who provides follow-up
17 healthcare and the pharmacy that dispenses prescribed
18 medications to a sexual assault survivor are responsible for
19 submitting the request for reimbursement for follow-up
20 healthcare or pharmacy services to the Illinois Sexual Assault
21 Emergency Treatment Program.

22 (d) The Department of Healthcare and Family Services shall
23 establish standards, rules, and regulations to implement this
24 Section.

25 (Source: P.A. 89-507, eff. 7-1-97; 90-587, eff. 7-1-98; revised
26 12-15-05.)

1 (410 ILCS 70/4 rep.)

2 (410 ILCS 70/6 rep.)

3 (410 ILCS 70/6.3 rep.)

4 Section 10. The Sexual Assault Survivors Emergency

5 Treatment Act is amended by repealing Sections 4, 6, and 6.3.

1 INDEX

2 Statutes amended in order of appearance

3	410 ILCS 70/1a	from Ch. 111 1/2, par. 87-1a
4	410 ILCS 70/2	from Ch. 111 1/2, par. 87-2
5	410 ILCS 70/2.1	from Ch. 111 1/2, par. 87-2.1
6	410 ILCS 70/2.2	
7	410 ILCS 70/3	from Ch. 111 1/2, par. 87-3
8	410 ILCS 70/5	from Ch. 111 1/2, par. 87-5
9	410 ILCS 70/5.5 new	
10	410 ILCS 70/6.1	from Ch. 111 1/2, par. 87-6.1
11	410 ILCS 70/6.2	from Ch. 111 1/2, par. 87-6.2
12	410 ILCS 70/6.4	from Ch. 111 1/2, par. 87-6.4
13	410 ILCS 70/7	from Ch. 111 1/2, par. 87-7
14	410 ILCS 70/4 rep.	
15	410 ILCS 70/6 rep.	
16	410 ILCS 70/6.3 rep.	