



State Government Administration Committee

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LRB096 09529 RLC 23344 a

1 AMENDMENT TO HOUSE BILL 2574

2 AMENDMENT NO. _____. Amend House Bill 2574 by replacing
3 everything after the enacting clause with the following:

4 "Section 5. The Unified Code of Corrections is amended by
5 changing Section 3-6-2 as follows:

6 (730 ILCS 5/3-6-2) (from Ch. 38, par. 1003-6-2)

7 Sec. 3-6-2. Institutions and Facility Administration.

8 (a) Each institution and facility of the Department shall
9 be administered by a chief administrative officer appointed by
10 the Director. A chief administrative officer shall be
11 responsible for all persons assigned to the institution or
12 facility. The chief administrative officer shall administer
13 the programs of the Department for the custody and treatment of
14 such persons.

15 (b) The chief administrative officer shall have such
16 assistants as the Department may assign.

1 (c) The Director or Assistant Director shall have the
2 emergency powers to temporarily transfer individuals without
3 formal procedures to any State, county, municipal or regional
4 correctional or detention institution or facility in the State,
5 subject to the acceptance of such receiving institution or
6 facility, or to designate any reasonably secure place in the
7 State as such an institution or facility and to make transfers
8 thereto. However, transfers made under emergency powers shall
9 be reviewed as soon as practicable under Article 8, and shall
10 be subject to Section 5-905 of the Juvenile Court Act of 1987.
11 This Section shall not apply to transfers to the Department of
12 Human Services which are provided for under Section 3-8-5 or
13 Section 3-10-5.

14 (d) The Department shall provide educational programs for
15 all committed persons so that all persons have an opportunity
16 to attain the achievement level equivalent to the completion of
17 the twelfth grade in the public school system in this State.
18 Other higher levels of attainment shall be encouraged and
19 professional instruction shall be maintained wherever
20 possible. The Department may establish programs of mandatory
21 education and may establish rules and regulations for the
22 administration of such programs. A person committed to the
23 Department who, during the period of his or her incarceration,
24 participates in an educational program provided by or through
25 the Department and through that program is awarded or earns the
26 number of hours of credit required for the award of an

1 associate, baccalaureate, or higher degree from a community
2 college, college, or university located in Illinois shall
3 reimburse the State, through the Department, for the costs
4 incurred by the State in providing that person during his or
5 her incarceration with the education that qualifies him or her
6 for the award of that degree. The costs for which reimbursement
7 is required under this subsection shall be determined and
8 computed by the Department under rules and regulations that it
9 shall establish for that purpose. However, interest at the rate
10 of 6% per annum shall be charged on the balance of those costs
11 from time to time remaining unpaid, from the date of the
12 person's parole, mandatory supervised release, or release
13 constituting a final termination of his or her commitment to
14 the Department until paid.

15 (d-5) A person committed to the Department is entitled to
16 confidential testing for infection with human immunodeficiency
17 virus (HIV) and to counseling in connection with such testing,
18 with no copay to the committed person. A person committed to
19 the Department who has tested positive for infection with HIV
20 is entitled to medical care while incarcerated, counseling, and
21 referrals to support services, in connection with that positive
22 test result. Implementation of this subsection (d-5) is subject
23 to appropriation.

24 (e) A person committed to the Department who becomes in
25 need of medical or surgical treatment but is incapable of
26 giving consent thereto shall receive such medical or surgical

1 treatment by the chief administrative officer consenting on the
2 person's behalf. Before the chief administrative officer
3 consents, he or she shall obtain the advice of one or more
4 physicians licensed to practice medicine in all its branches in
5 this State. If such physician or physicians advise:

6 (1) that immediate medical or surgical treatment is
7 required relative to a condition threatening to cause
8 death, damage or impairment to bodily functions, or
9 disfigurement; and

10 (2) that the person is not capable of giving consent to
11 such treatment; the chief administrative officer may give
12 consent for such medical or surgical treatment, and such
13 consent shall be deemed to be the consent of the person for
14 all purposes, including, but not limited to, the authority
15 of a physician to give such treatment.

16 (e-5) If a physician providing medical care to a committed
17 person on behalf of the Department advises the chief
18 administrative officer that the committed person's mental or
19 physical health has deteriorated as a result of the cessation
20 of ingestion of food or liquid to the point where medical or
21 surgical treatment is required to prevent death, damage, or
22 impairment to bodily functions, the chief administrative
23 officer may authorize such medical or surgical treatment.

24 (f) In the event that the person requires medical care and
25 treatment at a place other than the institution or facility,
26 the person may be removed therefrom under conditions prescribed

1 by the Department. The Department shall require the committed
2 person receiving medical or dental services on a non-emergency
3 basis to pay a \$2 co-payment to the Department for each visit
4 for medical or dental services. The amount of each co-payment
5 shall be deducted from the committed person's individual
6 account. A committed person who has a chronic illness, as
7 defined by Department rules and regulations, shall be exempt
8 from the \$2 co-payment for treatment of the chronic illness. A
9 committed person shall not be subject to a \$2 co-payment for
10 follow-up visits ordered by a physician, who is employed by, or
11 contracts with, the Department. A committed person who is
12 indigent is exempt from the \$2 co-payment and is entitled to
13 receive medical or dental services on the same basis as a
14 committed person who is financially able to afford the
15 co-payment. Notwithstanding any other provision in this
16 subsection (f) to the contrary, any person committed to any
17 facility operated by the Department of Juvenile Justice, as set
18 forth in Section 3-2.5-15 of this Code, is exempt from the
19 co-payment requirement for the duration of confinement in those
20 facilities.

21 (g) Any person having sole custody of a child at the time
22 of commitment or any woman giving birth to a child after her
23 commitment, may arrange through the Department of Children and
24 Family Services for suitable placement of the child outside of
25 the Department of Corrections. The Director of the Department
26 of Corrections may determine that there are special reasons why

1 the child should continue in the custody of the mother until
2 the child is 6 years old.

3 (h) The Department may provide Family Responsibility
4 Services which may consist of, but not be limited to the
5 following:

6 (1) family advocacy counseling;

7 (2) parent self-help group;

8 (3) parenting skills training;

9 (4) parent and child overnight program;

10 (5) parent and child reunification counseling, either
11 separately or together, preceding the inmate's release;
12 and

13 (6) a prerelease reunification staffing involving the
14 family advocate, the inmate and the child's counselor, or
15 both and the inmate.

16 (i) Prior to the release of any inmate who has a documented
17 history of intravenous drug use, and upon the receipt of that
18 inmate's written informed consent, the Department shall
19 provide for the testing of such inmate for infection with human
20 immunodeficiency virus (HIV) and any other identified
21 causative agent of acquired immunodeficiency syndrome (AIDS).
22 The testing provided under this subsection shall consist of an
23 enzyme-linked immunosorbent assay (ELISA) test or such other
24 test as may be approved by the Illinois Department of Public
25 Health. If the test result is positive, the Western Blot Assay
26 or more reliable confirmatory test shall be administered. All

1 inmates tested in accordance with the provisions of this
2 subsection shall be provided with pre-test and post-test
3 counseling. Notwithstanding any provision of this subsection
4 to the contrary, the Department shall not be required to
5 conduct the testing and counseling required by this subsection
6 unless sufficient funds to cover all costs of such testing and
7 counseling are appropriated for that purpose by the General
8 Assembly.

9 (j) Any person convicted of a sex offense as defined in the
10 Sex Offender Management Board Act shall be required to receive
11 a sex offender evaluation prior to release into the community
12 from the Department of Corrections. The sex offender evaluation
13 shall be conducted in conformance with the standards and
14 guidelines developed under the Sex Offender Management Board
15 Act and by an evaluator approved by the Board.

16 (k) Any minor committed to the Department of Juvenile
17 Justice for a sex offense as defined by the Sex Offender
18 Management Board Act shall be required to undergo sex offender
19 treatment by a treatment provider approved by the Board and
20 conducted in conformance with the Sex Offender Management Board
21 Act.

22 (l) Prior to the release of any inmate, the Department must
23 provide the inmate with the option of testing for infection
24 with human immunodeficiency virus (HIV), as well as counseling
25 in connection with such testing, with no copayment for the
26 test. At the same time, the Department shall require each such

1 inmate to sign a form stating that the inmate has been informed
2 of his or her rights with respect to the testing required to be
3 offered under this subsection (1) and providing the inmate with
4 an opportunity to indicate either that he or she wants to be
5 tested or that he or she does not want to be tested. The
6 Department, in consultation with the Department of Public
7 Health, shall prescribe the contents of the form. The testing
8 provided under this subsection (1) shall consist of an
9 enzyme-linked immunosorbent assay (ELISA) test or any other
10 test approved by the Department of Public Health. If the test
11 result is positive, the Western Blot Assay or more reliable
12 confirmatory test shall be administered.

13 Prior to the release of an inmate who the Department knows
14 has tested positive for infection with HIV, the Department in a
15 timely manner shall offer the inmate transitional case
16 management, including referrals to other support services.

17 Implementation of this subsection (1) is subject to
18 appropriation.

19 (m) The chief administrative officer of each institution or
20 facility of the Department shall make a room in the institution
21 or facility available for addiction recovery services to be
22 provided to committed persons on a voluntary basis. The
23 services shall be provided for one hour once a week at a time
24 specified by the chief administrative officer of the
25 institution or facility if the following conditions are met:

26 (1) the addiction recovery service contacts the chief

1 administrative officer to arrange the meeting;

2 (2) the committed person may attend the meeting for
3 addiction recovery services only if the committed person
4 uses pre-existing free time already available to the
5 committed person;

6 (3) all disciplinary and other rules of the institution
7 or facility remain in effect;

8 (4) the committed person is not given any additional
9 privileges to attend addiction recovery services;

10 (5) if the addiction recovery service does not arrange
11 for scheduling a meeting for that week, no addiction
12 recovery services shall be provided to the committed person
13 in the institution or facility for that week;

14 (6) the number of committed persons who may attend an
15 addiction recovery meeting shall not exceed 40 during any
16 session held at the correctional institution or facility;

17 (7) a volunteer seeking to provide addiction recovery
18 services under this subsection (m) must submit an
19 application to the Department of Corrections under
20 existing Department rules and the Department must review
21 the application within 60 days after submission of the
22 application to the Department; and

23 (8) each institution and facility of the Department
24 shall manage the addiction recovery services program
25 according to its own processes and procedures.

26 For the purposes of this subsection (m), "addiction

1 recovery services" means recovery services for alcoholics and
2 addicts provided by volunteers of recovery support services
3 recognized by the Department of Human Services.

4 (Source: P.A. 93-616, eff. 1-1-04; 93-928, eff. 1-1-05; 94-629,
5 eff. 1-1-06; 94-696, eff. 6-1-06.)

6 Section 99. Effective date. This Act takes effect January
7 1, 2010."