

**SB2583**



**96TH GENERAL ASSEMBLY**

**State of Illinois**

**2009 and 2010**

**SB2583**

Introduced 1/21/2010, by Sen. William Delgado

**SYNOPSIS AS INTRODUCED:**

20 ILCS 2310/2310-76

Amends the Department of Public Health Powers and Duties Law. With respect to the Task Force on Chronic Disease and Health Promotion: (i) removes the deadline for convening the Task Force; (ii) designates as chair the Public Health Advocate, appointed by the Governor and added to the Task Force (now, the Director of Public Health); and (iii) requires the Task Force to report its recommendations to the General Assembly and the Director of Public Health by December 31, 2010 (now, report to the Director of Public Health by July 1, 2010). Effective immediately.

LRB096 17154 JAM 32485 b

FISCAL NOTE ACT  
MAY APPLY

**A BILL FOR**

1 AN ACT concerning State government.

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 changing Section 2310-76 as follows:

7 (20 ILCS 2310/2310-76)

8 Sec. 2310-76. Chronic Disease Prevention and Health  
9 Promotion Task Force.

10 (a) In Illinois, as well as in other parts of the United  
11 States, chronic diseases are a significant health and economic  
12 problem for our citizens and State government. Chronic diseases  
13 such as cancer, diabetes, cardiovascular disease, and  
14 arthritis are largely preventable non-communicable conditions  
15 associated with risk factors such as poor nutrition, physical  
16 inactivity, tobacco or alcohol abuse, as well as other social  
17 determinants of chronic illness. It is fully documented by  
18 national and State data that significant disparity exists  
19 between racial, ethnic, and socioeconomic groups and that the  
20 incidence and impact of many of these conditions  
21 disproportionately affect these populations.

22 Chronic diseases can take away a person's quality of life  
23 or his or her ability to work. The Centers for Disease Control

1 and Prevention reports that 7 out of 10 Americans who die each  
2 year, or more than 1.7 million people, die of a chronic  
3 disease. In Illinois, studies have indicated that during the  
4 study period the State has spent more than \$12.5 billion in  
5 health care dollars to treat chronic diseases in our State. The  
6 financial burden for Illinois from the impact of lost work days  
7 and lower employee productivity during the same time period  
8 related to chronic diseases resulted in an annual economic loss  
9 of \$43.6 billion. These same studies have concluded that  
10 improvements in preventing and managing chronic diseases could  
11 drastically reduce future costs associated with chronic  
12 disease in Illinois and that the most effective way to trim  
13 healthcare spending in Illinois and across the U.S. is to take  
14 measures aimed at preventing diseases before we have to treat  
15 them. Furthermore, by addressing health disparities and by  
16 targeting chronic disease prevention and health promotion  
17 services toward the highest risk groups, especially in  
18 communities where racial, ethnic, and socioeconomic factors  
19 indicate high rates of these diseases, the goals of improving  
20 the overall health status for all Illinois residents can be  
21 achieved. Health promotion and prevention programs and  
22 activities are scattered throughout a number of State agencies  
23 with various streams of funding and little coordination. While  
24 the State has been looking at making significant changes to  
25 healthcare coverage for a portion of the population, in order  
26 to have the most effective impact, any changes to the

1 healthcare delivery system in Illinois should take into  
2 consideration and integrate the role of prevention and health  
3 promotion in that system.

4 (b) ~~A Subject to appropriation, within 6 months after the~~  
5 ~~effective date of this amendatory Act of the 95th General~~  
6 ~~Assembly,~~ a Task Force on Chronic Disease Prevention and Health  
7 Promotion shall be convened to study and make recommendations  
8 regarding the structure of the chronic disease prevention and  
9 health promotion system in Illinois, as well as changes that  
10 should be made to the system in order to integrate and  
11 coordinate efforts in the State and ensure continuity and  
12 consistency of purpose and the elimination of disparity in the  
13 delivery of this care in Illinois.

14 (c) The Department of Public Health shall have primary  
15 responsibility for, and shall provide staffing and technical  
16 and administrative support for, the Task Force in its efforts.  
17 The other State agencies represented on the Task Force shall  
18 work cooperatively with the Department of Public Health to  
19 provide administrative and technical support to the Task Force  
20 in its efforts. Membership of the Task Force shall consist of  
21 19 ~~18~~ members as follows: the Public Health Advocate, appointed  
22 by the Governor, who shall serve as Chair; the Director of  
23 Public Health, ~~who shall serve as Chair;~~ the Secretary of Human  
24 Services or his or her designee; the Director of Aging or his  
25 or her designee; the Director of Healthcare and Family Services  
26 or his or her designee; 4 members of the General Assembly, one

1 from the State Senate appointed by the President of the Senate,  
2 one from the State Senate appointed by the Minority Leader of  
3 the Senate, one from the House of Representatives appointed by  
4 the Speaker of the House, and one from the House of  
5 Representatives appointed by the Minority Leader of the House;  
6 and 10 members appointed by the Director of Public Health and  
7 who shall be representative of State associations and advocacy  
8 organizations with a primary focus that includes chronic  
9 disease prevention, public health delivery, medicine, health  
10 care and disease management, or community health.

11 (d) The Task Force shall seek input from interested parties  
12 and shall hold a minimum of 3 public hearings across the State,  
13 including one in northern Illinois, one in central Illinois,  
14 and one in southern Illinois.

15 (e) On or before December 31 ~~July 1~~, 2010, the Task Force  
16 shall, at a minimum, make recommendations to the General  
17 Assembly and the Director of Public Health on the following:  
18 reforming the delivery system for chronic disease prevention  
19 and health promotion in Illinois; ensuring adequate funding for  
20 infrastructure and delivery of programs; addressing health  
21 disparity; and the role of health promotion and chronic disease  
22 prevention in support of State spending on health care.

23 (Source: P.A. 95-900, eff. 8-25-08; 96-328, eff. 8-11-09.)

24 Section 99. Effective date. This Act takes effect upon  
25 becoming law.