AN ACT concerning regulation.

## Be it enacted by the People of the State of Illinois, represented in the General Assembly:

Section 2. The Election Code is amended by changing Section 11-8 as follows:

(10 ILCS 5/11-8)

(Section scheduled to be repealed on January 1, 2023)

Sec. 11-8. Vote centers.

- (a) Notwithstanding any law to the contrary, election authorities shall establish at least one location to be located at an office of the election authority or in the largest municipality within its jurisdiction where all voters in its jurisdiction are allowed to vote on election day during polling place hours, regardless of the precinct in which they are registered. An election authority establishing such a location under this Section shall identify the location and any health and safety requirements by the 40th day preceding the 2022 general primary election and the 2022 general election and certify such to the State Board of Elections.
- (b) This Section is repealed on <u>July January</u> 1, 2023. (Source: P.A. 102-15, eff. 6-17-21; 102-668, eff. 11-15-21.)

Section 3. The Civil Administrative Code of Illinois is

amended by changing Section 5-565 as follows:

- (20 ILCS 5/5-565) (was 20 ILCS 5/6.06)
- Sec. 5-565. In the Department of Public Health.
- (a) The General Assembly declares it to be the public policy of this State that all residents of Illinois are entitled to lead healthy lives. Governmental public health has a specific responsibility to ensure that a public health system is in place to allow the public health mission to be achieved. The public health system is the collection of public, private, and voluntary entities as well as individuals and informal associations that contribute to the public's health within the State. To develop a public health system requires certain core functions to be performed by government. The State Board of Health is to assume the leadership role in advising the Director in meeting the following functions:
  - (1) Needs assessment.
  - (2) Statewide health objectives.
  - (3) Policy development.
  - (4) Assurance of access to necessary services.

There shall be a State Board of Health composed of 20 persons, all of whom shall be appointed by the Governor, with the advice and consent of the Senate for those appointed by the Governor on and after June 30, 1998, and one of whom shall be a senior citizen age 60 or over. Five members shall be physicians licensed to practice medicine in all its branches,

one representing a medical school faculty, one who is board certified in preventive medicine, and one who is engaged in private practice. One member shall be a chiropractic physician. One member shall be a dentist; one an environmental health practitioner; one a local public health administrator; one a local board of health member; one a registered nurse; one a physical therapist; one an optometrist; one a veterinarian; one a public health academician; one a health care industry representative; one a representative of the business community; one a representative of the non-profit public interest community; and 2 shall be citizens at large.

The terms of Board of Health members shall be 3 years, except that members shall continue to serve on the Board of Health until a replacement is appointed. Upon the effective date of Public Act 93-975 (January 1, 2005), in the appointment of the Board of Health members appointed to vacancies or positions with terms expiring on or before December 31, 2004, the Governor shall appoint up to 6 members to serve for terms of 3 years; up to 6 members to serve for terms of 2 years; and up to 5 members to serve for a term of one year, so that the term of no more than 6 members expire in the same year. All members shall be legal residents of the State of Illinois. The duties of the Board shall include, but not be limited to, the following:

(1) To advise the Department of ways to encourage public understanding and support of the Department's

programs.

- (2) To evaluate all boards, councils, committees, authorities, and bodies advisory to, or an adjunct of, the Department of Public Health or its Director for the purpose of recommending to the Director one or more of the following:
  - (i) The elimination of bodies whose activities are not consistent with goals and objectives of the Department.
  - (ii) The consolidation of bodies whose activities encompass compatible programmatic subjects.
  - (iii) The restructuring of the relationship between the various bodies and their integration within the organizational structure of the Department.
  - (iv) The establishment of new bodies deemed essential to the functioning of the Department.
- (3) To serve as an advisory group to the Director for public health emergencies and control of health hazards.
- (4) To advise the Director regarding public health policy, and to make health policy recommendations regarding priorities to the Governor through the Director.
- (5) To present public health issues to the Director and to make recommendations for the resolution of those issues.
- (6) To recommend studies to delineate public health problems.

- (7) To make recommendations to the Governor through the Director regarding the coordination of State public health activities with other State and local public health agencies and organizations.
- (8) To report on or before February 1 of each year on the health of the residents of Illinois to the Governor, the General Assembly, and the public.
- To review the final draft of all proposed administrative rules, other than emergency or peremptory rules and those rules that another advisory body must approve or review within a statutorily defined time period, of the Department after September 19, 1991 (the effective date of Public Act 87-633). The Board shall review the proposed rules within 90 days of submission by Department shall Department. The consideration any comments and recommendations of the Board regarding the proposed rules prior to submission to the Secretary of State for initial publication. If the Department disagrees with the recommendations of Board, it shall submit a written response outlining the reasons for not accepting the recommendations.

In the case of proposed administrative rules or amendments to administrative rules regarding immunization of children against preventable communicable diseases designated by the Director under the Communicable Disease Prevention Act, after the Immunization Advisory Committee

has made its recommendations, the Board shall conduct 3 public hearings, geographically distributed throughout the State. At the conclusion of the hearings, the State Board of Health shall issue a report, including its recommendations, to the Director. The Director shall take into consideration any comments or recommendations made by the Board based on these hearings.

(10) To deliver to the Governor for presentation to the General Assembly a State Health Assessment (SHA) and a State Health Improvement Plan (SHIP). The first 5 such plans shall be delivered to the Governor on January 1, 2006, January 1, 2009, January 1, 2016, January 1, 2021, and December 31, 2023 2022, and then every 5 years thereafter.

The State Health Assessment and State Improvement Plan shall assess and recommend priorities and strategies to improve the public health system and  $\tau$  the Illinois residents, reduce health health status of disparities and inequities, and promote health equity. The State Health Assessment and State Health Improvement Plan development and implementation shall conform to national Public Health Accreditation Board Standards. The State Health Assessment and State Health Improvement development and implementation process shall be carried out with the administrative and operational support of the Department of Public Health.

The State Health Assessment shall include comprehensive, broad-based data and information from a variety of sources on health status and the public health system including:

- (i) quantitative data, if it is available, on the demographics and health status of the population, including data over time on health by gender identity, sexual orientation, race, ethnicity, age, socio-economic factors, geographic region, disability status, and other indicators of disparity;
- (ii) quantitative data on social and structural issues affecting health (social and structural determinants of health), including, but not limited to, housing, transportation, educational attainment, employment, and income inequality;
- (iii) priorities and strategies developed at the community level through the Illinois Project for Local Assessment of Needs (IPLAN) and other local and regional community health needs assessments;
- (iv) qualitative data representing the population's input on health concerns and well-being, including the perceptions of people experiencing disparities and health inequities;
- (v) information on health disparities and health
  inequities; and
  - (vi) information on public health system strengths

and areas for improvement.

The State Health Improvement Plan shall focus on prevention, social determinants of health, and promoting health equity as key strategies for long-term health improvement in Illinois.

State Health Improvement Plan shall identify priority State health issues and social issues affecting health, and shall examine and make recommendations on the contributions and strategies of the public and private sectors for improving health status and the public health system in the State. In addition to recommendations on health status improvement priorities and strategies for the population of the State as a whole, the State Health Improvement Plan shall make recommendations, provided that data exists to support such recommendations, regarding priorities and strategies for reducing and eliminating health disparities and health inequities in Illinois; including racial, ethnic, gender identification, sexual orientation, age, disability, socio-economic, geographic disparities. The State Health Improvement Plan shall make recommendations regarding social determinants of health, such as housing, transportation, educational attainment, employment, and income inequality.

The development and implementation of the State Health
Assessment and State Health Improvement Plan shall be a
collaborative public-private cross-agency effort overseen

by the SHA and SHIP Partnership. The Director of Public Health shall consult with the Governor to ensure participation by the head of State agencies with public health responsibilities (or their designees) in the SHA and SHIP Partnership, including, but not limited to, the Department of Public Health, the Department of Human Services, the Department of Healthcare and Family Services, the Department of Children and Family Services, the Environmental Protection Agency, the Illinois State Board of Education, the Department on Aging, the Illinois Housing Development Authority, the Illinois Criminal Justice Information Authority, the Department of Agriculture, the Department of Transportation, Department of Corrections, the Department of Commerce and Economic Opportunity, and the Chair of the State Board of Health to also serve on the Partnership. A member of the Governor's staff shall participate in the Partnership and serve as a liaison to the Governor's office.

The Director of Public Health shall appoint a minimum of 15 other members of the SHA and SHIP Partnership representing a range of public, private, and voluntary sector stakeholders and participants in the public health system. For the first SHA and SHIP Partnership after April 27, 2021 (the effective date of Public Act 102-4) this amendatory Act of the 102nd General Assembly, one-half of the members shall be appointed for a 3-year term, and

one-half of the members shall be appointed for a 5-year term. Subsequently, members shall be appointed to 5-year terms. Should any member not be able to fulfill his or her term, the Director may appoint a replacement to complete that term. The Director, in consultation with the SHA and SHIP Partnership, may engage additional individuals and organizations to serve on subcommittees and ad hoc efforts to conduct the State Health Assessment and develop and implement the State Health Improvement Plan. Members of the SHA and SHIP Partnership shall receive no compensation for serving as members, but may be reimbursed for their necessary expenses if departmental resources allow.

Partnership The SHA and SHIP shall include: representatives of local health departments individuals with expertise who represent an array of organizations and constituencies engaged in public health improvement and prevention, such as non-profit public interest groups, groups serving populations experience health disparities and health inequities, groups addressing social determinants of health, health issue groups, faith community groups, health businesses providers, and employers, academic institutions, and community-based organizations.

The Director shall endeavor to make the membership of the Partnership diverse and inclusive of the racial, ethnic, gender, socio-economic, and geographic diversity of the State. The SHA and SHIP Partnership shall be chaired by the Director of Public Health or his or her designee.

The SHA and SHIP Partnership shall develop and implement a community engagement process that facilitates input into the development of the State Health Assessment and State Health Improvement Plan. This engagement process shall ensure that individuals with lived experience in the issues addressed in the State Health Assessment and State Health Improvement Plan are meaningfully engaged in the development and implementation of the State Health Assessment and State Health Improvement Plan.

The State Board of Health shall hold at least 3 public hearings addressing a draft of the State Health Improvement Plan in representative geographic areas of the State.

Upon the delivery of each State Health Assessment and and State Health Improvement Plan, the SHA SHTP Partnership shall coordinate the efforts and engagement of the public, private, and voluntary sector stakeholders and participants in the public health system to implement each The Partnership shall serve as a forum for collaborative action; coordinate existing and initiatives; develop detailed implementation steps, with mechanisms for action; implement specific projects; identify public and private funding sources at the local,

State and federal level; promote public awareness of the SHIP; and advocate for the implementation of the SHIP. The SHA and SHIP Partnership shall implement strategies to ensure that individuals and communities affected by health disparities and health inequities are engaged in the process throughout the 5-year cycle. The SHA and SHIP Partnership shall regularly evaluate and update the State Health Assessment and track implementation of the State Health Improvement Plan with revisions as necessary. The SHA and SHIP Partnership shall not have the authority to direct any public or private entity to take specific action to implement the SHIP.

The State Board of Health shall submit a report by January 31 of each year on the status of State Health Improvement Plan implementation and community engagement activities to the Governor, General Assembly, and public. In the fifth year, the report may be consolidated into the new State Health Assessment and State Health Improvement Plan.

- (11) Upon the request of the Governor, to recommend to the Governor candidates for Director of Public Health when vacancies occur in the position.
- (12) To adopt bylaws for the conduct of its own business, including the authority to establish ad hoc committees to address specific public health programs requiring resolution.

(13) (Blank).

Upon appointment, the Board shall elect a chairperson from among its members.

Members of the Board shall receive compensation for their services at the rate of \$150 per day, not to exceed \$10,000 per year, as designated by the Director for each day required for transacting the business of the Board and shall be reimbursed for necessary expenses incurred in the performance of their duties. The Board shall meet from time to time at the call of the Department, at the call of the chairperson, or upon the request of 3 of its members, but shall not meet less than 4 times per year.

- (b) (Blank).
- which shall counsel and advise with the Director on the administration of the Autopsy Act. The Advisory Board shall consist of 11 members, including a senior citizen age 60 or over, appointed by the Governor, one of whom shall be designated as chairman by a majority of the members of the Board. In the appointment of the first Board the Governor shall appoint 3 members to serve for terms of one 1 year, 3 for terms of 2 years, and 3 for terms of 3 years. The members first appointed under Public Act 83-1538 shall serve for a term of 3 years. All members appointed thereafter shall be appointed for terms of 3 years, except that when an appointment is made to fill a vacancy, the appointment shall be for the remaining

term of the position vacant. The members of the Board shall be citizens of the State of Illinois. In the appointment of members of the Advisory Board, the Governor shall appoint 3 members who shall be persons licensed to practice medicine and surgery in the State of Illinois, at least 2 of whom shall have received post-graduate training in the field of pathology; 3 members who are duly elected coroners in this State; and 5 members who shall have interest and abilities in the field of forensic medicine but who shall be neither persons licensed to practice any branch of medicine in this State nor coroners. In the appointment of medical and coroner members of the Board, the Governor shall invite nominations from recognized medical and coroners organizations in this State respectively. Board members, while serving on business of the Board, shall receive actual necessary travel and subsistence expenses while so serving away from their places of residence.

(Source: P.A. 102-4, eff. 4-27-21; 102-558, eff. 8-20-21; 102-674, eff. 11-30-21; revised 6-7-22.)

Section 5. The Department of Commerce and Economic Opportunity Law of the Civil Administrative Code of Illinois is amended by changing Section 605-1045.1 as follows:

(20 ILCS 605/605-1045.1)

(Section scheduled to be repealed on January 1, 2023)

Sec. 605-1045.1. Restore Illinois Collaborative

Commission. The General Assembly finds and declares that this amendatory Act of the 102nd General Assembly manifests the intention of the General Assembly to extend the repeal of Section 605-1045. Section 605-1045 as enacted and reenacted in this Section shall be deemed to have been in continuous effect since June 12, 2020 and it shall continue to be in effect henceforward until it is otherwise lawfully repealed. All previously enacted amendments to this Section taking effect on or after June 12, 2020, are hereby validated. All actions taken in reliance on the continuing effect of Section 605-1045 by any person or entity are hereby validated. In order to ensure the continuing effectiveness of this Section, it is set forth in full and reenacted by this amendatory Act of the 102nd General Assembly. This reenactment is intended continuation of this Section. It is not intended to supersede any amendment to this Section that is enacted by the 102nd General Assembly.

(a) The General Assembly hereby finds and declares that the State is confronted with a public health crisis that has created unprecedented challenges for the State's diverse economic base. In light of this crisis, and the heightened need for collaboration between the legislative and executive branches, the General Assembly hereby establishes the Restore Illinois Collaborative Commission. The members of the Commission will participate in and provide input on plans to revive the various sectors of the State's economy in the wake

of the COVID-19 pandemic.

- (b) The Department may request meetings be convened to address revitalization efforts for the various sectors of the State's economy. Such meetings may include public participation as determined by the Commission.
- (c) The Department shall provide a written report to the Commission and the General Assembly not less than every 30 days regarding the status of current and proposed revitalization efforts. The written report shall include applicable metrics that demonstrate progress on recovery efforts, as well as any additional information as requested by the Commission. The first report shall be delivered by July 1, 2020. The reports to the General Assembly shall be delivered to all members, in addition to complying with the requirements of Section 3.1 of the General Assembly Organization Act.
- (d) The Restore Illinois Collaborative Commission shall consist of 14 members, appointed as follows:
  - (1) four members of the House of Representatives appointed by the Speaker of the House of Representatives;
  - (2) four members of the Senate appointed by the Senate President;
  - (3) three members of the House of Representatives appointed by the Minority Leader of the House of Representatives; and
  - (4) three members of the Senate appointed by the Senate Minority Leader.

- (e) The Speaker of the House of Representatives and the Senate President shall each appoint one member of the Commission to serve as a Co-Chair. The Co-Chairs may convene meetings of the Commission. The members of the Commission shall serve without compensation.
- (f) This Section is repealed January 1, 2024 2023. (Source: P.A. 102-577, eff. 8-24-21.)

Section 10. The Illinois Power Agency Act is amended by changing Section 1-130 as follows:

(20 ILCS 3855/1-130)

(Section scheduled to be repealed on January 1, 2023)

Sec. 1-130. Home rule preemption.

(a) The authorization to impose any new taxes or fees specifically related to the generation of electricity by, the capacity to generate electricity by, or the emissions into the atmosphere by electric generating facilities after the effective date of this Act is an exclusive power and function of the State. A home rule unit may not levy any new taxes or fees specifically related to the generation of electricity by, the capacity to generate electricity by, or the emissions into the atmosphere by electric generating facilities after the effective date of this Act. This Section is a denial and limitation on home rule powers and functions under subsection (g) of Section 6 of Article VII of the Illinois Constitution.

(b) This Section is repealed on January 1, <u>2024</u> <del>2023</del>. (Source: P.A. 101-639, eff. 6-12-20; 102-671, eff. 11-30-21.)

Section 15. The Illinois Immigrant Impact Task Force Act is amended by changing Sections 5 and 10 as follows:

(20 ILCS 5156/5)

(Section scheduled to be repealed on January 1, 2023)

Sec. 5. Illinois Immigrant Impact Task Force.

- (a) There is hereby established the Illinois Immigrant Impact Task Force.
- (b) The Task Force shall consist of 27 members appointed as follows:
  - (1) one member appointed by the President of the Senate;
  - (2) one member appointed by the Speaker of the House of Representatives;
  - (3) one member appointed by the Minority Leader of the Senate;
  - (4) one member appointed by the Minority Leader of the House of Representatives;
    - (5) one representative of the Governor's Office;
  - (6) one representative of the Governor's Office of Management and Budget;
  - (7) one representative of the Lieutenant Governor's Office;

- (8) the Executive Director of the Illinois Housing Development Authority or his or her designee;
- (9) the Secretary of Human Services or his or her designee;
  - (10) the Director on Aging or his or her designee;
- (11) the Director of Commerce and Economic Opportunity or his or her designee;
- (12) the Director of Children and Family Services or his or her designee;
- (13) the Director of Public Health or his or her designee;
- (14) the Director of Healthcare and Family Services or his or her designee;
- (15) the Director of Human Rights or his or her designee;
- (16) the Director of Employment Security or his or her designee;
- (17) the Director of Juvenile Justice or his or her designee;
- (18) the Director of Corrections or his or her designee;
- (19) the Executive Director of the Illinois Criminal Justice Information Authority or his or her designee;
- (20) the Chairman of the State Board of Education or his or her designee;
  - (21) the Chairman of the Board of Higher Education or

his or her designee;

- (22) the Chairman of the Illinois Community College Board or his or her designee; and
- (23) five representatives from organizations offering aid or services to immigrants, appointed by the Governor.
- (c) The Task Force shall convene as soon as practicable after the effective date of this Act, and shall hold at least 6 meetings. Members of the Task Force shall serve without compensation. The Department of Human Services, in consultation with any other State agency relevant to the issue of immigration in this State, shall provide administrative and other support to the Task Force.
  - (d) The Task Force shall examine the following issues:
  - (1) what the State of Illinois is currently doing to proactively help immigrant communities in this State, including whether such persons are receiving help to become citizens, receiving help to become business owners, and receiving aid for educational purposes;
  - (2) what can the State do going forward to improve relations between the State and immigrant communities in this State;
  - (3) what is the status of immigrant communities from urban, suburban, and rural areas of this State, and whether adequate support and resources have been provided to these communities;
    - (4) the extent to which immigrants in this State are

being discriminated against;

- (5) whether the laws specifically intended to benefit immigrant populations in this State are actually having a beneficial effect;
- (6) the practices and procedures of the federal Immigration and Customs Enforcement agency within this State;
- (7) the use and condition of detention centers in this State;
- (8) all contracts in Illinois entered into with United States Immigration and Customs Enforcement, including contracts with private detention centers, the Illinois State Police, and the Secretary of State's Office, Division of Motor Vehicles;
- (9) the impact of the COVID-19 pandemic on immigrant communities, including health impact rates, employment rates, housing, small businesses, and community development;
- (10) the disbursement of funds received by different agencies that went to immigrant communities;
- (11) language access programs and their impact on helping immigrant communities better interact with State agencies, and whether existing language access programs are effective in helping immigrant communities interact with the State. The Task Force shall also examine whether all State agencies provide language access for non-English

speakers, and which agencies and in what regions of the State is there a lack of language access that creates barriers for non-English dominant speakers from accessing support from the State;

- (12) the extent to which disparities in access to technology exist in immigrant communities and whether they lead to educational, financial, and other disadvantages; and
- (13) the extent to which State programs intended for vulnerable populations such as victims of trafficking, crime, and abuse are being implemented or need to be implemented.
- (e) The Task Force shall report its findings and recommendations based upon its examination of issues under subsection (d) to the Governor and the General Assembly on or before April 30, 2023 December 31, 2022.

(Source: P.A. 102-236, eff. 8-2-21; 102-1071, eff. 6-10-22.)

(20 ILCS 5156/10)

(Section scheduled to be repealed on January 1, 2023)

Sec. 10. Repeal. This Act is repealed on  $\underline{\text{May 1}}$  January 1, 2023.

(Source: P.A. 102-236, eff. 8-2-21.)

Section 20. The Special Commission on Gynecologic Cancers Act is amended by changing Section 100-90 as follows:

(20 ILCS 5170/100-90)

(Section scheduled to be repealed on January 1, 2023)

Sec. 100-90. Repeal. This Article is repealed on January 1, 2028 = 2023.

(Source: P.A. 102-4, eff. 4-27-21.)

Section 25. The Community Emergency Services and Support Act is amended by changing Section 65 as follows:

(50 ILCS 754/65)

Sec. 65. PSAP and emergency service dispatched through a 9-1-1 PSAP; coordination of activities with mobile and behavioral health services. Each 9-1-1 PSAP and emergency service dispatched through a 9-1-1 PSAP must begin coordinating its activities with the mobile mental and behavioral health services established by the Division of Mental Health once all 3 of the following conditions are met, but not later than July January 1, 2023:

- (1) the Statewide Committee has negotiated useful protocol and 9-1-1 operator script adjustments with the contracted services providing these tools to 9-1-1 PSAPs operating in Illinois;
- (2) the appropriate Regional Advisory Committee has completed design of the specific 9-1-1 PSAP's process for coordinating activities with the mobile mental and

behavioral health service; and

(3) the mobile mental and behavioral health service is available in their jurisdiction.

(Source: P.A. 102-580, eff. 1-1-22.)

Section 30. The Developmental Disability and Mental Disability Services Act is amended by changing Section 7A-1 as follows:

(405 ILCS 80/7A-1)

(Section scheduled to be repealed on January 1, 2023)

Sec. 7A-1. Diversion from Facility-based Care Pilot Program.

- (a) The purposes of this Article are to:
- (1) decrease the number of admissions to State-operated facilities;
- (2) address the needs of individuals receiving Home and Community Based Services (HCBS) with intellectual disabilities or developmental disabilities who are at risk of facility-based care due to significant behavioral challenges, some with a dual diagnosis of mental illness, by providing a community-based residential alternative to facility-based care consistent with their individual plans, and to transition these individuals back to a traditional community-integrated living arrangement or other HCBS community setting program;

- (3) create greater capacity within the short-term stabilization homes by allowing individuals who need an extended period of treatment to transfer to a long-term stabilization home;
- (4) stabilize the existing community-integrated living arrangement homes where the presence of individuals with complex behavioral challenges is disruptive to their housemates; and
- (5) add support services to enhance community service providers who serve individuals with significant behavioral challenges.
- (b) Subject to appropriation or the availability of other funds for these purposes at the discretion of the Department, the Department shall establish the Diversion from Facility-based Care Pilot Program consisting of at least 6 homes in various locations in this State in accordance with this Article and the following model:
  - (1) the Diversion from Facility-based Care Model shall serve individuals with intellectual disabilities or developmental disabilities who are currently receiving HCBS services and are at risk of facility-based care due to significant behavioral challenges, some with a dual diagnosis of mental illness, for a period ranging from one to 2 years, or longer if appropriate for the individual;
  - (2) the Program shall be regulated in accordance with the community-integrated living arrangement guidelines;

- (3) each home shall support no more than 4 residents, each having his or her own bedroom;
- (4) if, at any point, an individual, his or her guardian, or family caregivers, in conjunction with the provider and clinical staff, believe the individual is capable of participating in a HCBS service, those opportunities shall be offered as they become available; and
- (5) providers shall have adequate resources, experience, and qualifications to serve the population target by the Program, as determined by the Department;
- (6) participating Program providers and the Department shall participate in an ongoing collaborative whereby best practices and treatment experiences would be shared and utilized;
- (7) home locations shall be proposed by the provider in collaboration with other community stakeholders;
- in (8) The Department, collaboration with participating providers, by rule shall develop data collection and reporting requirements for participating community service providers. Beginning December 31, 2020 Department shall submit the an annual electronically to the General Assembly and Governor that outlines the progress and effectiveness of the pilot program. The report to the General Assembly shall be filed with the Clerk of the House of Representatives and the

Secretary of the Senate in electronic form only, in the manner that the Clerk and the Secretary shall direct;

- (9) the staffing model shall allow for a high level of community integration and engagement and family involvement; and
- (10) appropriate day services, staff training priorities, and home modifications shall be incorporated into the Program model, as allowed by HCBS authorization.
- (c) This Section is repealed on January 1,  $\underline{2025}$   $\underline{2023}$ . (Source: P.A. 100-924, eff. 7-1-19.)

Section 40. The Transportation Network Providers Act is amended by changing Section 34 as follows:

(625 ILCS 57/34)

(Section scheduled to be repealed on January 1, 2023)

Sec. 34. Repeal. This Act is repealed on <u>September</u> <del>January</del> 1, 2023.

(Source: P.A. 101-639, eff. 6-12-20. Reenacted by P.A. 101-660, eff. 4-2-21. P.A. 102-7, eff. 5-28-21.)

Section 45. The Unified Code of Corrections is amended by changing Sections 5-4.5-110 and 5-6-3.6 as follows:

(730 ILCS 5/5-4.5-110)

(Section scheduled to be repealed on January 1, 2023)

Sec. 5-4.5-110. SENTENCING GUIDELINES FOR INDIVIDUALS WITH PRIOR FELONY FIREARM-RELATED OR OTHER SPECIFIED CONVICTIONS.

(a) DEFINITIONS. For the purposes of this Section:

"Firearm" has the meaning ascribed to it in Section
1.1 of the Firearm Owners Identification Card Act.

"Qualifying predicate offense" means the following offenses under the Criminal Code of 2012:

- (A) aggravated unlawful use of a weapon under Section 24-1.6 or similar offense under the Criminal Code of 1961, when the weapon is a firearm;
- (B) unlawful use or possession of a weapon by a felon under Section 24-1.1 or similar offense under the Criminal Code of 1961, when the weapon is a firearm;
- (C) first degree murder under Section 9-1 or similar offense under the Criminal Code of 1961;
- (D) attempted first degree murder with a firearm or similar offense under the Criminal Code of 1961;
- (E) aggravated kidnapping with a firearm under paragraph (6) or (7) of subsection (a) of Section 10-2 or similar offense under the Criminal Code of 1961;
- (F) aggravated battery with a firearm under subsection (e) of Section 12-3.05 or similar offense under the Criminal Code of 1961;
- (G) aggravated criminal sexual assault under Section 11-1.30 or similar offense under the Criminal

Code of 1961;

- (H) predatory criminal sexual assault of a child under Section 11-1.40 or similar offense under the Criminal Code of 1961;
- (I) armed robbery under Section 18-2 or similar offense under the Criminal Code of 1961;
- (J) vehicular hijacking under Section 18-3 or similar offense under the Criminal Code of 1961;
- (K) aggravated vehicular hijacking under Section 18-4 or similar offense under the Criminal Code of 1961;
- (L) home invasion with a firearm under paragraph (3), (4), or (5) of subsection (a) of Section 19-6 or similar offense under the Criminal Code of 1961;
- (M) aggravated discharge of a firearm under Section 24-1.2 or similar offense under the Criminal Code of 1961;
- (N) aggravated discharge of a machine gun or a firearm equipped with a device designed or used for silencing the report of a firearm under Section 24-1.2-5 or similar offense under the Criminal Code of 1961;
- (0) unlawful use of firearm projectiles under Section 24-2.1 or similar offense under the Criminal Code of 1961;
  - (P) manufacture, sale, or transfer of bullets or

shells represented to be armor piercing bullets, dragon's breath shotgun shells, bolo shells, or flechette shells under Section 24-2.2 or similar offense under the Criminal Code of 1961;

- (Q) unlawful sale or delivery of firearms under Section 24-3 or similar offense under the Criminal Code of 1961;
- (R) unlawful discharge of firearm projectiles under Section 24-3.2 or similar offense under the Criminal Code of 1961;
- (S) unlawful sale or delivery of firearms on school premises of any school under Section 24-3.3 or similar offense under the Criminal Code of 1961;
- (T) unlawful purchase of a firearm under Section 24-3.5 or similar offense under the Criminal Code of 1961;
- (U) use of a stolen firearm in the commission of an offense under Section 24-3.7 or similar offense under the Criminal Code of 1961;
- (V) possession of a stolen firearm under Section 24-3.8 or similar offense under the Criminal Code of 1961;
- (W) aggravated possession of a stolen firearm under Section 24-3.9 or similar offense under the Criminal Code of 1961;
  - (X) gunrunning under Section 24-3A or similar

offense under the Criminal Code of 1961;

- (Y) defacing identification marks of firearms under Section 24-5 or similar offense under the Criminal Code of 1961; and
- (Z) armed violence under Section 33A-2 or similar offense under the Criminal Code of 1961.
- (b) APPLICABILITY. For an offense committed on or after January 1, 2018 (the effective date of Public Act 100-3) this amendatory Act of the 100th General Assembly and before January 1, 2024 2023, when a person is convicted of unlawful use or possession of a weapon by a felon, when the weapon is a firearm, or aggravated unlawful use of a weapon, when the weapon is a firearm, after being previously convicted of a qualifying predicate offense the person shall be subject to the sentencing guidelines under this Section.
  - (c) SENTENCING GUIDELINES.
  - (1) When a person is convicted of unlawful use or possession of a weapon by a felon, when the weapon is a firearm, and that person has been previously convicted of a qualifying predicate offense, the person shall be sentenced to a term of imprisonment within the sentencing range of not less than 7 years and not more than 14 years, unless the court finds that a departure from the sentencing guidelines under this paragraph is warranted under subsection (d) of this Section.
    - (2) When a person is convicted of aggravated unlawful

use of a weapon, when the weapon is a firearm, and that person has been previously convicted of a qualifying predicate offense, the person shall be sentenced to a term of imprisonment within the sentencing range of not less than 6 years and not more than 7 years, unless the court finds that a departure from the sentencing guidelines under this paragraph is warranted under subsection (d) of this Section.

- (3) The sentencing guidelines in paragraphs (1) and (2) of this subsection (c) apply only to offenses committed on and after <u>January 1, 2018</u> (the effective date of <u>Public Act 100-3)</u> this amendatory Act of the 100th General Assembly and before January 1, 2024 2023.
- (d) DEPARTURE FROM SENTENCING GUIDELINES.
- (1) At the sentencing hearing conducted under Section 5-4-1 of this Code, the court may depart from the sentencing guidelines provided in subsection (c) of this Section and impose a sentence otherwise authorized by law for the offense if the court, after considering any factor under paragraph (2) of this subsection (d) relevant to the nature and circumstances of the crime and to the history and character of the defendant, finds on the record substantial and compelling justification that the sentence within the sentencing guidelines would be unduly harsh and that a sentence otherwise authorized by law would be consistent with public safety and does not deprecate the

seriousness of the offense.

- (2) In deciding whether to depart from the sentencing guidelines under this paragraph, the court shall consider:
  - (A) the age, immaturity, or limited mental capacity of the defendant at the time of commission of the qualifying predicate or current offense, including whether the defendant was suffering from a mental or physical condition insufficient to constitute a defense but significantly reduced the defendant's culpability;
  - (B) the nature and circumstances of the qualifying predicate offense;
  - (C) the time elapsed since the qualifying predicate offense;
  - (D) the nature and circumstances of the current offense;
    - (E) the defendant's prior criminal history;
  - (F) whether the defendant committed the qualifying predicate or current offense under specific and credible duress, coercion, threat, or compulsion;
  - (G) whether the defendant aided in the apprehension of another felon or testified truthfully on behalf of another prosecution of a felony; and
  - (H) whether departure is in the interest of the person's rehabilitation, including employment or educational or vocational training, after taking into

account any past rehabilitation efforts or dispositions of probation or supervision, and the defendant's cooperation or response to rehabilitation.

- (3) When departing from the sentencing guidelines under this Section, the court shall specify on the record, the particular evidence, information, factor or factors, or other reasons which led to the departure from the sentencing guidelines. When departing from the sentencing range in accordance with this subsection (d), the court shall indicate on the sentencing order which departure factor or factors outlined in paragraph (2) of this subsection (d) led to the sentence imposed. The sentencing order shall be filed with the clerk of the court and shall be a public record.
- (e) This Section is repealed on January 1,  $\underline{2024}$   $\underline{2023}$ . (Source: P.A. 100-3, eff. 1-1-18.)

(730 ILCS 5/5-6-3.6)

(Section scheduled to be repealed on January 1, 2023) Sec. 5-6-3.6. First Time Weapon Offender Program.

(a) The General Assembly has sought to promote public safety, reduce recidivism, and conserve valuable resources of the criminal justice system through the creation of diversion programs for non-violent offenders. This amendatory Act of the 100th General Assembly establishes a pilot program for first-time, non-violent offenders charged with certain weapons

offenses. The General Assembly recognizes some persons, particularly young adults in areas of high crime or poverty, may have experienced trauma that contributes to poor decision making skills, and the creation of a diversionary program poses a greater benefit to the community and the person than incarceration. Under this program, a court, with the consent of the defendant and the State's Attorney, may sentence a defendant charged with an unlawful use of weapons offense under Section 24-1 of the Criminal Code of 2012 or aggravated unlawful use of a weapon offense under Section 24-1.6 of the Criminal Code of 2012, if punishable as a Class 4 felony or lower, to a First Time Weapon Offender Program.

- (b) A defendant is not eligible for this Program if:
- (1) the offense was committed during the commission of a violent offense as defined in subsection (h) of this Section;
- (2) he or she has previously been convicted or placed on probation or conditional discharge for any violent offense under the laws of this State, the laws of any other state, or the laws of the United States;
- (3) he or she had a prior successful completion of the First Time Weapon Offender Program under this Section;
- (4) he or she has previously been adjudicated a delinquent minor for the commission of a violent offense;
  - (5) he or she is 21 years of age or older; or
  - (6) he or she has an existing order of protection

issued against him or her.

- (b-5) In considering whether a defendant shall be sentenced to the First Time Weapon Offender Program, the court shall consider the following:
  - (1) the age, immaturity, or limited mental capacity of the defendant;
    - (2) the nature and circumstances of the offense;
  - (3) whether participation in the Program is in the interest of the defendant's rehabilitation, including any employment or involvement in community, educational, training, or vocational programs;
  - (4) whether the defendant suffers from trauma, as supported by documentation or evaluation by a licensed professional; and
    - (5) the potential risk to public safety.
- (c) For an offense committed on or after <u>January 1, 2018</u> (the effective date of <u>Public Act 100-3</u>) this amendatory Act of the 100th General Assembly and before January 1, 2024 2023, whenever an eligible person pleads guilty to an unlawful use of weapons offense under Section 24-1 of the Criminal Code of 2012 or aggravated unlawful use of a weapon offense under Section 24-1.6 of the Criminal Code of 2012, which is punishable as a Class 4 felony or lower, the court, with the consent of the defendant and the State's Attorney, may, without entering a judgment, sentence the defendant to complete the First Time Weapon Offender Program. When a

defendant is placed in the Program, the court shall defer further proceedings in the case until the conclusion of the period or until the filing of a petition alleging violation of a term or condition of the Program. Upon violation of a term or condition of the Program, the court may enter a judgment on its original finding of guilt and proceed as otherwise provided by law. Upon fulfillment of the terms and conditions of the Program, the court shall discharge the person and dismiss the proceedings against the person.

- (d) The Program shall be at least 18 months and not to exceed 24 months, as determined by the court at the recommendation of the Program administrator and the State's Attorney. The Program administrator may be appointed by the Chief Judge of each Judicial Circuit.
- (e) The conditions of the Program shall be that the defendant:
  - (1) not violate any criminal statute of this State or any other jurisdiction;
  - (2) refrain from possessing a firearm or other dangerous weapon;
    - (3) obtain or attempt to obtain employment;
  - (4) attend educational courses designed to prepare the defendant for obtaining a high school diploma or to work toward passing high school equivalency testing or to work toward completing a vocational training program;
    - (5) refrain from having in his or her body the

presence of any illicit drug prohibited by the Methamphetamine Control and Community Protection Act, the Cannabis Control Act, or the Illinois Controlled Substances Act, unless prescribed by a physician, and submit samples of his or her blood or urine or both for tests to determine the presence of any illicit drug;

- (6) perform a minimum of 50 hours of community service;
- (7) attend and participate in any Program activities deemed required by the Program administrator, including but not limited to: counseling sessions, in-person and over the phone check-ins, and educational classes; and
  - (8) pay all fines, assessments, fees, and costs.
- (f) The Program may, in addition to other conditions, require that the defendant:
  - (1) wear an ankle bracelet with GPS tracking;
  - (2) undergo medical or psychiatric treatment, or treatment or rehabilitation approved by the Department of Human Services; and
  - (3) attend or reside in a facility established for the instruction or residence of defendants on probation.
- (g) There may be only one discharge and dismissal under this Section. If a person is convicted of any offense which occurred within 5 years subsequent to a discharge and dismissal under this Section, the discharge and dismissal under this Section shall be admissible in the sentencing

proceeding for that conviction as evidence in aggravation.

- (h) For purposes of this Section, "violent offense" means any offense in which bodily harm was inflicted or force was used against any person or threatened against any person; any offense involving the possession of a firearm or dangerous weapon; any offense involving sexual conduct, sexual penetration, or sexual exploitation; violation of an order of protection, stalking, hate crime, domestic battery, or any offense of domestic violence.
- (i) This Section is repealed on January 1,  $\underline{2024}$   $\underline{2023}$ . (Source: P.A. 102-245, eff. 8-3-21.)

Section 50. The Disposition of Remains of the Indigent Act is amended by changing Section 35 as follows:

(755 ILCS 66/35)

(Section scheduled to be repealed on December 31, 2022)

Sec. 35. Repealer. This Act is repealed on December 31, 2027 <del>2022</del>.

(Source: P.A. 100-526, eff. 6-1-18.)

Section 55. "An Act concerning criminal law", approved August 20, 2021, Public Act 102-490, is amended by changing Section 99 as follows:

(P.A. 102-490, Sec. 99)

Sec. 99. Effective date. This Act takes effect on January 1, 2024 2023.

(Source: P.A. 102-490.)

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