



## 96TH GENERAL ASSEMBLY

### State of Illinois

2009 and 2010

HB1292

Introduced 2/18/2009, by Rep. Angelo Saviano

#### SYNOPSIS AS INTRODUCED:

20 ILCS 5/5-565  
210 ILCS 60/15

was 20 ILCS 5/6.06

Amends the Civil Administrative Code of Illinois; adds a chiropractic physician as a member of the State Board of Health. Amends the Hospice Program Licensing Act. Adds the following as a member of the Hospice and Palliative Care Advisory Board: a chiropractic physician, selected from the recommendations of the statewide chiropractic society representing the largest number of chiropractic physicians in the State. Provides that the chiropractic physician member shall serve for a term of 4 years. Effective immediately.

LRB096 03190 DRJ 13773 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 Civil Administrative Code of Illinois is  
5 amended by changing Section 5-565 as follows:

6 (20 ILCS 5/5-565) (was 20 ILCS 5/6.06)

7 Sec. 5-565. In the Department of Public Health.

8 (a) The General Assembly declares it to be the public  
9 policy of this State that all citizens of Illinois are entitled  
10 to lead healthy lives. Governmental public health has a  
11 specific responsibility to ensure that a system is in place to  
12 allow the public health mission to be achieved. To develop a  
13 system requires certain core functions to be performed by  
14 government. The State Board of Health is to assume the  
15 leadership role in advising the Director in meeting the  
16 following functions:

17 (1) Needs assessment.

18 (2) Statewide health objectives.

19 (3) Policy development.

20 (4) Assurance of access to necessary services.

21 There shall be a State Board of Health composed of 18 ~~17~~  
22 persons, all of whom shall be appointed by the Governor, with  
23 the advice and consent of the Senate for those appointed by the

1 Governor on and after June 30, 1998, and one of whom shall be a  
2 senior citizen age 60 or over. Five members shall be physicians  
3 licensed to practice medicine in all its branches, one  
4 representing a medical school faculty, one who is board  
5 certified in preventive medicine, and one who is engaged in  
6 private practice. One member shall be a chiropractic physician.  
7 One member shall be a dentist; one an environmental health  
8 practitioner; one a local public health administrator; one a  
9 local board of health member; one a registered nurse; one a  
10 veterinarian; one a public health academician; one a health  
11 care industry representative; one a representative of the  
12 business community; one a representative of the non-profit  
13 public interest community; and 2 shall be citizens at large.

14 The terms of Board of Health members shall be 3 years,  
15 except that members shall continue to serve on the Board of  
16 Health until a replacement is appointed. Upon the effective  
17 date of this amendatory Act of the 93rd General Assembly, in  
18 the appointment of the Board of Health members appointed to  
19 vacancies or positions with terms expiring on or before  
20 December 31, 2004, the Governor shall appoint up to 6 members  
21 to serve for terms of 3 years; up to 6 members to serve for  
22 terms of 2 years; and up to 5 members to serve for a term of one  
23 year, so that the term of no more than 6 members expire in the  
24 same year. All members shall be legal residents of the State of  
25 Illinois. The duties of the Board shall include, but not be  
26 limited to, the following:

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

4           (2) To evaluate all boards, councils, committees,  
5 authorities, and bodies advisory to, or an adjunct of, the  
6 Department of Public Health or its Director for the purpose  
7 of recommending to the Director one or more of the  
8 following:

9           (i) The elimination of bodies whose activities are  
10 not consistent with goals and objectives of the  
11 Department.

12           (ii) The consolidation of bodies whose activities  
13 encompass compatible programmatic subjects.

14           (iii) The restructuring of the relationship  
15 between the various bodies and their integration  
16 within the organizational structure of the Department.

17           (iv) The establishment of new bodies deemed  
18 essential to the functioning of the Department.

19           (3) To serve as an advisory group to the Director for  
20 public health emergencies and control of health hazards.

21           (4) To advise the Director regarding public health  
22 policy, and to make health policy recommendations  
23 regarding priorities to the Governor through the Director.

24           (5) To present public health issues to the Director and  
25 to make recommendations for the resolution of those issues.

26           (6) To recommend studies to delineate public health

1 problems.

2 (7) To make recommendations to the Governor through the  
3 Director regarding the coordination of State public health  
4 activities with other State and local public health  
5 agencies and organizations.

6 (8) To report on or before February 1 of each year on  
7 the health of the residents of Illinois to the Governor,  
8 the General Assembly, and the public.

9 (9) To review the final draft of all proposed  
10 administrative rules, other than emergency or preemptory  
11 rules and those rules that another advisory body must  
12 approve or review within a statutorily defined time period,  
13 of the Department after September 19, 1991 (the effective  
14 date of Public Act 87-633). The Board shall review the  
15 proposed rules within 90 days of submission by the  
16 Department. The Department shall take into consideration  
17 any comments and recommendations of the Board regarding the  
18 proposed rules prior to submission to the Secretary of  
19 State for initial publication. If the Department disagrees  
20 with the recommendations of the Board, it shall submit a  
21 written response outlining the reasons for not accepting  
22 the recommendations.

23 In the case of proposed administrative rules or  
24 amendments to administrative rules regarding immunization  
25 of children against preventable communicable diseases  
26 designated by the Director under the Communicable Disease

1 Prevention Act, after the Immunization Advisory Committee  
2 has made its recommendations, the Board shall conduct 3  
3 public hearings, geographically distributed throughout the  
4 State. At the conclusion of the hearings, the State Board  
5 of Health shall issue a report, including its  
6 recommendations, to the Director. The Director shall take  
7 into consideration any comments or recommendations made by  
8 the Board based on these hearings.

9 (10) To deliver to the Governor for presentation to the  
10 General Assembly a State Health Improvement Plan. The first  
11 and second such plans shall be delivered to the Governor on  
12 January 1, 2006 and on January 1, 2009 respectively, and  
13 then every 4 years thereafter.

14 The Plan shall recommend priorities and strategies to  
15 improve the public health system and the health status of  
16 Illinois residents, taking into consideration national  
17 health objectives and system standards as frameworks for  
18 assessment.

19 The Plan shall also take into consideration priorities  
20 and strategies developed at the community level through the  
21 Illinois Project for Local Assessment of Needs (IPLAN) and  
22 any regional health improvement plans that may be  
23 developed. The Plan shall focus on prevention as a key  
24 strategy for long-term health improvement in Illinois.

25 The Plan shall examine and make recommendations on the  
26 contributions and strategies of the public and private

1 sectors for improving health status and the public health  
2 system in the State. In addition to recommendations on  
3 health status improvement priorities and strategies for  
4 the population of the State as a whole, the Plan shall make  
5 recommendations regarding priorities and strategies for  
6 reducing and eliminating health disparities in Illinois;  
7 including racial, ethnic, gender, age, socio-economic and  
8 geographic disparities.

9 The Director of the Illinois Department of Public  
10 Health shall appoint a Planning Team that includes a range  
11 of public, private, and voluntary sector stakeholders and  
12 participants in the public health system. This Team shall  
13 include: the directors of State agencies with public health  
14 responsibilities (or their designees), including but not  
15 limited to the Illinois Departments of Public Health and  
16 Department of Human Services, representatives of local  
17 health departments, representatives of local community  
18 health partnerships, and individuals with expertise who  
19 represent an array of organizations and constituencies  
20 engaged in public health improvement and prevention.

21 The State Board of Health shall hold at least 3 public  
22 hearings addressing drafts of the Plan in representative  
23 geographic areas of the State. Members of the Planning Team  
24 shall receive no compensation for their services, but may  
25 be reimbursed for their necessary expenses.

26 (11) Upon the request of the Governor, to recommend to

1 the Governor candidates for Director of Public Health when  
2 vacancies occur in the position.

3 (12) To adopt bylaws for the conduct of its own  
4 business, including the authority to establish ad hoc  
5 committees to address specific public health programs  
6 requiring resolution.

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

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

18 (b) (Blank).

19 (c) An Advisory Board on Necropsy Service to Coroners,  
20 which shall counsel and advise with the Director on the  
21 administration of the Autopsy Act. The Advisory Board shall  
22 consist of 11 members, including a senior citizen age 60 or  
23 over, appointed by the Governor, one of whom shall be  
24 designated as chairman by a majority of the members of the  
25 Board. In the appointment of the first Board the Governor shall  
26 appoint 3 members to serve for terms of 1 year, 3 for terms of 2

1 years, and 3 for terms of 3 years. The members first appointed  
2 under Public Act 83-1538 shall serve for a term of 3 years. All  
3 members appointed thereafter shall be appointed for terms of 3  
4 years, except that when an appointment is made to fill a  
5 vacancy, the appointment shall be for the remaining term of the  
6 position vacant. The members of the Board shall be citizens of  
7 the State of Illinois. In the appointment of members of the  
8 Advisory Board the Governor shall appoint 3 members who shall  
9 be persons licensed to practice medicine and surgery in the  
10 State of Illinois, at least 2 of whom shall have received  
11 post-graduate training in the field of pathology; 3 members who  
12 are duly elected coroners in this State; and 5 members who  
13 shall have interest and abilities in the field of forensic  
14 medicine but who shall be neither persons licensed to practice  
15 any branch of medicine in this State nor coroners. In the  
16 appointment of medical and coroner members of the Board, the  
17 Governor shall invite nominations from recognized medical and  
18 coroners organizations in this State respectively. Board  
19 members, while serving on business of the Board, shall receive  
20 actual necessary travel and subsistence expenses while so  
21 serving away from their places of residence.

22 (Source: P.A. 93-975, eff. 1-1-05.)

23 Section 10. The Hospice Program Licensing Act is amended by  
24 changing Section 15 as follows:

1 (210 ILCS 60/15)

2 Sec. 15. Hospice and Palliative Care Advisory Board.

3 (a) The Director shall appoint a Hospice and Palliative  
4 Care Advisory Board ("the Board") to consult with the  
5 Department as provided in this Section. The membership of the  
6 Board shall be as follows:

7 (1) The Director, ex officio, who shall be a nonvoting  
8 member and shall serve as chairman of the Board.

9 (2) One representative of each of the following State  
10 agencies, each of whom shall be a nonvoting member: the  
11 Department of Healthcare and Family Services, the  
12 Department of Human Services, and the Department on Aging.

13 (3) One member who is a physician licensed to practice  
14 medicine in all its branches, selected from the  
15 recommendations of a statewide professional society  
16 representing physicians licensed to practice medicine in  
17 all its branches in all specialties; and one member who is  
18 a chiropractic physician, selected from the  
19 recommendations of the statewide chiropractic society  
20 representing the largest number of chiropractic physicians  
21 in the State of Illinois.

22 (4) One member who is a registered nurse, selected from  
23 the recommendations of professional nursing associations.

24 (5) Four members selected from the recommendations of  
25 organizations whose primary membership consists of hospice  
26 programs.

1           (6) Two members who represent the general public and  
2           who have no responsibility for management or formation of  
3           policy of a hospice program and no financial interest in a  
4           hospice program.

5           (7) One member selected from the recommendations of  
6           consumer organizations that engage in advocacy or legal  
7           representation on behalf of hospice patients and their  
8           immediate families.

9           (b) Of the initial appointees, 4 shall serve for terms of 2  
10          years, 4 shall serve for terms of 3 years, and 5 shall serve  
11          for terms of 4 years, as determined by lot at the first meeting  
12          of the Board. Each successor member shall be appointed for a  
13          term of 4 years. The chiropractic physician member shall serve  
14          for a term of 4 years. A member appointed to fill a vacancy  
15          before the expiration of the term for which his or her  
16          predecessor was appointed shall be appointed to serve for the  
17          remainder of that term.

18          (c) The Board shall meet as frequently as the chairman  
19          deems necessary, but not less than 4 times each year. Upon the  
20          request of 4 or more Board members, the chairman shall call a  
21          meeting of the Board. A Board member may designate a  
22          replacement to serve at a Board meeting in place of the member  
23          by submitting a letter stating that designation to the chairman  
24          before or at the Board meeting. The replacement member must  
25          represent the same general interests as the member being  
26          replaced, as described in paragraphs (1) through (7) of

1 subsection (a).

2 (d) Board members are entitled to reimbursement for their  
3 actual expenses incurred in performing their duties.

4 (e) The Board shall advise the Department on all aspects of  
5 the Department's responsibilities under this Act, including  
6 the format and content of any rules adopted by the Department  
7 on or after the effective date of this amendatory Act of the  
8 95th General Assembly. Any such rule or amendment to a rule  
9 proposed on or after the effective date of this amendatory Act  
10 of the 95th General Assembly, except an emergency rule adopted  
11 pursuant to Section 5-45 of the Illinois Administrative  
12 Procedure Act, that is adopted without obtaining the advice of  
13 the Board is null and void. If the Department fails to follow  
14 the advice of the Board with respect to a proposed rule or  
15 amendment to a rule, the Department shall, before adopting the  
16 rule or amendment to a rule, transmit a written explanation of  
17 the reason for its action to the Board. During its review of  
18 rules, the Board shall analyze the economic and regulatory  
19 impact of those rules. If the Board, having been asked for its  
20 advice with respect to a proposed rule or amendment to a rule,  
21 fails to advise the Department within 90 days, the proposed  
22 rule or amendment shall be considered to have been acted upon  
23 by the Board.

24 (Source: P.A. 95-133, eff. 1-1-08.)

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