



99TH GENERAL ASSEMBLY

State of Illinois

2015 and 2016

HB3205

by Rep. Michael J. Zalewski

SYNOPSIS AS INTRODUCED:

New Act
5 ILCS 80/4.36 new
210 ILCS 5/6.5
210 ILCS 85/10.7

Creates the Anesthesiologist Assistant Practice Act. Provides for the licensure of anesthesiologist assistants by the Department of Financial and Professional Regulation. Sets forth provisions concerning qualifications, grounds for disciplinary action, and administrative procedures. Preempts home rule. Makes conforming changes in the Ambulatory Surgical Treatment Center Act and the Hospital Licensing Act. Amends the Regulatory Sunset Act to provide for repeal of the Anesthesiologist Assistant Practice Act on January 1, 2026. Effective immediately.

LRB099 04463 HAF 24491 b

CORRECTIONAL
BUDGET AND
IMPACT NOTE ACT
MAY APPLY

FISCAL NOTE ACT
MAY APPLY

HOME RULE NOTE
ACT MAY APPLY

1 AN ACT concerning regulation.

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

4 Section 1. Short title. This Act may be cited as the
5 Anesthesiologist Assistant Practice Act.

6 Section 5. Purpose and intent. The practice of
7 anesthesiology is the practice of medicine. The practice as an
8 anesthesiologist assistant in the State of Illinois is declared
9 to affect the public health, safety, and welfare and to be
10 subject to regulation and control in the public interest. The
11 purpose and legislative intent of this Act is to encourage and
12 promote the more effective utilization of the skills of
13 anesthesiologists by enabling them to delegate certain medical
14 care to anesthesiologist assistants where such delegation is
15 consistent with the health and welfare of the patient and is
16 conducted at the direction of and under the responsible
17 supervision of an anesthesiologist.

18 It is further declared to be a matter of public health and
19 concern that the practice as an anesthesiologist assistant
20 merit and receive the confidence of the public and that only a
21 qualified person be authorized to practice as an
22 anesthesiologist assistant in the State of Illinois. This Act
23 shall be liberally construed to best carry out these subjects

1 and purposes.

2 Section 10. Administrative Procedure Act. The Illinois
3 Administrative Procedure Act is hereby expressly adopted and
4 incorporated herein as if all of the provisions of that Act
5 were included in this Act. The Secretary may adopt rules for
6 the administration and enforcement of this Act and may
7 prescribe forms to be issued in connection with this Act.

8 Section 15. Definitions. As used in this Act:

9 "Address of Record" means the designated address recorded
10 by the Department in the applicant's or licensee's application
11 file or license file as maintained by the Department's
12 licensure maintenance unit. It is the duty of the applicant or
13 licensee to inform the Department of any change of address and
14 those changes must be made either through the Department's
15 website or by contacting the Department.

16 "Anesthesiologist" means a physician licensed to practice
17 medicine in all its branches by the Department of Financial and
18 Professional Regulation who has completed a residency in
19 anesthesiology approved by the American Board of
20 Anesthesiology or the American Osteopathic Board of
21 Anesthesiology, or foreign equivalent, holds an unrestricted
22 license, and is actively engaged in clinical practice.

23 "Anesthesiologist assistant" means an individual licensed
24 by the Department of Financial and Professional Regulation to

1 assist in the delivery of medical care, including anesthesia
2 services under the supervision of an anesthesiologist.

3 "Department" means the Department of Financial and
4 Professional Regulation.

5 "Disciplinary Board" means the Medical Disciplinary Board
6 constituted under the Medical Practice Act of 1987.

7 "Licensing Board" means the Medical Licensing Board
8 constituted under the Medical Practice Act of 1987.

9 "Secretary" means the Secretary of Financial and
10 Professional Regulation.

11 "Supervision" means overseeing the activities of, and
12 accepting responsibility for, the medical services rendered by
13 the anesthesiologist assistant and maintaining physical
14 proximity that allows the anesthesiologist to return to
15 reestablish direct contact with the patient to meet medical
16 needs and address any urgent or emergent clinical problems at
17 all times that medical services are rendered by the
18 anesthesiologist assistant.

19 Section 20. Application of Act. This Act does not prohibit:

20 (1) any person licensed in this State under any other
21 Act from engaging in the practice for which he or she is
22 licensed;

23 (2) the practice as an anesthesiologist assistant by a
24 person who is employed by the United States government or
25 any bureau, division, or agency thereof while in the

1 discharge of the employee's official duties; or
2 (3) the practice as an anesthesiologist assistant that
3 is included in their program of study by students enrolled
4 in schools or in refresher courses approved by the
5 Department.

6 Section 25. Title; advertising; billing.

7 (a) No anesthesiologist assistant shall use the title of
8 doctor or associate with his or her name or any other term in
9 the clinical setting or while in contact with patients under
10 their care that would indicate to other persons that he or she
11 is qualified to engage in the general independent practice of
12 anesthesiology or interventional pain management.

13 (b) A licensee shall include in every advertisement for
14 services regulated under this Act his or her title as it
15 appears on the license or the initials authorized under this
16 Act.

17 (c) An anesthesiologist assistant shall not be allowed to
18 bill patients or in any way to charge for services. Nothing in
19 this Act, however, shall be so construed as to prevent the
20 employer of an anesthesiologist assistant from charging for
21 services rendered by the anesthesiologist assistant. Payment
22 for services rendered by an anesthesiologist assistant shall be
23 made to his or her employer if the payor would have made
24 payment had the services been provided by an anesthesiologist.

1 Section 30. Supervision requirements.

2 (a) An anesthesiologist assistant may deliver medical care
3 only under the supervision of an anesthesiologist and only as
4 described in a supervision agreement between the
5 anesthesiologist assistant and an anesthesiologist who
6 represents the anesthesiologist assistant's employer. The
7 supervising anesthesiologist shall be immediately available at
8 all times while supervising an anesthesiologist assistant.

9 For the purposes of this Section, "immediately available"
10 means the medically-directing anesthesiologist being in such
11 physical proximity that allows the anesthesiologist to return
12 to re-establish direct contact with the patient to meet the
13 patient's medical needs and address any urgent or emergent
14 problems. These responsibilities may also be met through
15 careful coordination among anesthesiologists of the same group
16 or department. Be it recognized that design and size of various
17 facilities, severity of patient illnesses, and the complexity
18 and demands of the particular surgical procedures make it
19 impossible to define a specific time or distance for physical
20 proximity.

21 (b) An anesthesiologist assistant's practice may not
22 exceed his or her education and training, the scope of practice
23 of the supervising anesthesiologist, and the practice outlined
24 in the anesthesiologist assistant supervision agreement. A
25 medical care task assigned by the supervising anesthesiologist
26 to the anesthesiologist assistant may not be delegated by the

1 anesthesiologist assistant to another person, except for the
2 preceptorship of a student in an anesthesiologist assistant
3 training program. An anesthesiologist assistant may perform
4 such services within the specialty of the supervising
5 anesthesiologist, except that the anesthesiologist shall
6 exercise such direction, supervision and control over such
7 anesthesiologist assistants as will ensure that patients shall
8 receive quality medical care. Anesthesiologist assistants
9 shall be capable of performing a variety of tasks within the
10 specialty of medical care under the supervision of an
11 anesthesiologist. The supervising anesthesiologist may
12 delegate tasks and duties to the anesthesiologist assistant.
13 Delegated tasks or duties shall be consistent with
14 anesthesiologist assistant education, training, and
15 experience. The delegated tasks or duties shall be specific to
16 the practice setting and shall be implemented and reviewed
17 under a written supervision agreement established by the
18 anesthesiologist or anesthesiologist/anesthesiologist
19 assistant team. An anesthesiologist assistant, acting as an
20 agent of the anesthesiologist, shall be permitted to transmit
21 the supervising anesthesiologist's orders as determined by the
22 institution's by-laws, policies, procedures, or job
23 description within which the anesthesiologist/
24 anesthesiologist assistant team practices. Anesthesiologist
25 assistants shall practice only in accordance with a written
26 supervision agreement.

1 (c) An anesthesiologist who represents an anesthesiologist
2 assistant's employer shall review a supervision agreement with
3 the anesthesiologist assistant at least annually. The
4 supervision agreement shall be available for inspection at the
5 location where the anesthesiologist assistant practices. The
6 supervision agreement may limit the practice of an
7 anesthesiologist assistant to less than the full scope of
8 practice authorized under this Act.

9 (d) An anesthesiologist assistant shall be employed by a
10 health care provider that is licensed in this State for the
11 primary purpose of providing the medical services of physicians
12 or that is an entity. If an anesthesiologist assistant's
13 employer is not an anesthesiologist, the employer shall provide
14 for, and not interfere with, an anesthesiologist's supervision
15 of the anesthesiologist assistant.

16 (e) A student in an anesthesiologist assistant training
17 program may assist only an anesthesiologist in the delivery of
18 medical care and may perform only medical care tasks assigned
19 by an anesthesiologist. An anesthesiologist may delegate the
20 preceptorship of a student in an anesthesiologist assistant
21 training program to a qualified anesthesia provider. This
22 Section shall not be interpreted to limit the number of other
23 qualified anesthesia providers an anesthesiologist may
24 supervise.

25 (f) A student in an anesthesiologist assistant training
26 program shall be identified as a student anesthesiologist

1 assistant or an anesthesiologist assistant student and may not
2 be identified as an "intern", "resident", or "fellow".

3 Section 35. Application for licensure. Applications for
4 original licenses shall be made to the Department in writing on
5 forms prescribed by the Department and shall be accompanied by
6 the required fee, which shall not be refundable. An application
7 shall require information that, in the judgment of the
8 Department, will enable the Department to pass on the
9 qualifications of the applicant for a license. An application
10 shall include evidence of meeting the qualifications for
11 licensure in Section 60 of this Act.

12 Applicants have 3 years from the date of application to
13 complete the application process. If the process has not been
14 completed in 3 years, the application shall be denied, the fee
15 shall be forfeited, and the applicant must reapply and meet the
16 requirements in effect at the time of reapplication.

17 Section 40. Social Security number on license application.
18 In addition to any other information required to be contained
19 in the application, every application for an original license
20 under this Act shall include the applicant's Social Security
21 number, which shall be retained in the agency's records
22 pertaining to the license.

23 As soon as practical, the Department shall assign a
24 customer's identification number to each applicant for a

1 license. Every application for a renewal or restored license
2 shall require the applicant's customer identification number.

3 Section 45. Identification. Beginning on January 1, 2016,
4 no person may designate himself or herself as an
5 anesthesiologist assistant or use or assume the title
6 "anesthesiologist assistant" or append to the person's name the
7 words or letters "anesthesiologist assistant" or "A.A." or any
8 other titles, letters, or designation that represents or may
9 tend to represent the person as an anesthesiologist assistant
10 unless he or she is licensed as an anesthesiologist assistant
11 by the Department. An anesthesiologist assistant shall be
12 clearly identified as an anesthesiologist assistant.

13 Section 50. Unlicensed practice; violation; civil penalty.

14 (a) Beginning on January 1, 2016, any person who practices,
15 offers to practice, attempts to practice, or holds oneself out
16 to practice as a anesthesiologist assistant without being
17 licensed under this Act shall, in addition to any other penalty
18 provided by law, pay a civil penalty to the Department in an
19 amount not to exceed \$10,000 for each offense as determined by
20 the Department. The civil penalty shall be assessed by the
21 Department after a hearing is held in accordance with the
22 provisions set forth in this Act regarding the provision of a
23 hearing for the discipline of a licensee.

24 (b) The Department has the authority and power to

1 investigate any and all unlicensed activity.

2 (c) The civil penalty shall be paid within 60 days after
3 the effective date of the order imposing the civil penalty. The
4 order shall constitute a judgment and may be filed and
5 execution had thereon in the same manner as any judgment from
6 any court of record.

7 Section 55. Committee.

8 (a) There is established an Anesthesiologist Assistant
9 Advisory Committee. The Anesthesiologist Assistant Advisory
10 Committee may review and make recommendations to the Department
11 and the Board regarding all matters relating to
12 anesthesiologist assistants. These matters may include, but
13 are not limited to:

- 14 (1) applications for licensure;
- 15 (2) disciplinary proceedings;
- 16 (3) renewal requirements; and
- 17 (4) any other issues pertaining to the regulation and
18 practice of anesthesiologist assistants in the State.

19 (b) The committee's membership shall consist of the
20 following members appointed by the Governor for 3-year terms:

- 21 (1) one member of the Medical Licensing Board;
- 22 (2) one anesthesiologist assistant licensed under this
23 Act;
- 24 (3) two anesthesiologists; and
- 25 (4) one public member.

1 The appointee under item (2) of this subsection (b) shall
2 be selected from a list of recommended appointees submitted by
3 a statewide association or society representing
4 anesthesiologists.

5 The appointees under item (3) of this subsection (b) shall
6 be selected from a list of recommended appointees submitted by
7 a statewide association or society representing
8 anesthesiologists.

9 (c) Members of the Anesthesiologist Assistant Advisory
10 Committee shall have no liability for any action based upon a
11 disciplinary proceeding or other activity performed in good
12 faith as a member of the committee.

13 Section 60. Qualifications for licensure. A person shall be
14 qualified for licensure as an anesthesiologist assistant and
15 the Department may issue an anesthesiologist assistant license
16 to a person who:

17 (1) has applied in writing in form and substance
18 satisfactory to the Department and has not violated any of
19 the provisions of this Act or the rules adopted under this
20 Act; the Department may take into consideration any felony
21 conviction of the applicant, but the conviction shall not
22 operate as an absolute bar to licensure;

23 (2) has submitted evidence satisfactory to the
24 Department that the applicant has:

25 (A) obtained a master's degree from an

1 anesthesiologist assistant program that is accredited
2 by the Commission on Accreditation of Allied Health
3 Education Programs, or its predecessor or successor
4 entity; and

5 (c) passed the certifying examination administered
6 by and obtained active certification from the National
7 Commission on Certification of Anesthesiologist
8 Assistants or a successor entity; and

9 (3) complies with all applicable rules of the
10 Department.

11 Section 65. Fees.

12 (a) Fees collected for the administration of this Act shall
13 be set by the Department by rule. All fees are not refundable.

14 (b) All moneys collected under this Act by the Department
15 shall be deposited in the Illinois State Medical Disciplinary
16 Fund in the State Treasury and used: (1) in the exercise of its
17 powers and performance of its duties under this Act; (2) for
18 costs directly related to license renewal of persons licensed
19 under this Act; and (3) for costs related to the public
20 purposes of the Department.

21 Section 70. Endorsement. Upon payment of the required fee,
22 the Department may, in its discretion, license as an
23 anesthesiologist assistant an applicant who is an
24 anesthesiologist assistant licensed in another jurisdiction,

1 if the requirements for licensure in that jurisdiction were at
2 the time of licensure substantially equivalent to the
3 requirement in force in this State on that date or equivalent
4 to the requirements of this Act.

5 Section 75. Expiration; renewal; restoration. The
6 expiration date and renewal period for each license issued
7 under this Act shall be set by rule. Renewal shall be
8 conditioned on paying the required fee and meeting such other
9 requirements as may be established by rule. Any
10 anesthesiologist assistant who has permitted his or her license
11 to expire or who has had his or her license on inactive status
12 may have the license restored by making application to the
13 Department and filing proof acceptable to the Department of his
14 or her fitness to have the license restored, and by paying the
15 required fees. Proof of fitness may include sworn evidence
16 certifying to active lawful practice in another jurisdiction.
17 If the anesthesiologist assistant has not maintained an active
18 practice in another jurisdiction satisfactory to the
19 Department, the Department shall determine, by an evaluation
20 program established by rule, his or her fitness for restoration
21 of the license and shall establish procedures and requirements
22 for such restoration. However, any anesthesiologist assistant
23 whose license expired while he or she was (1) in federal
24 service on active duty with the Armed Forces of the United
25 States, or the State Militia called into service or training,

1 or (2) in training or education under the supervision of the
2 United States preliminary to induction into the military
3 service, may have the license restored without paying any
4 lapsed renewal fees if within 2 years after honorable
5 termination of such service, training, or education he or she
6 furnishes the Department with satisfactory evidence to the
7 effect that he or she has been so engaged and that his or her
8 service, training, or education has been so terminated.

9 Section 80. Inactive status. Any anesthesiologist
10 assistant who notified the Department in writing on forms
11 prescribed by the Department, may elect to place his or her
12 license on an inactive status and shall, subject to rules of
13 the Department, be excused from payment of renewal fees until
14 he or she notifies the Department in writing of his or her
15 intention to restore the license. Any anesthesiologist
16 assistant requesting restoration from inactive status shall be
17 required to pay the current renewal fee and shall be required
18 to restore his or her license, as provided in Section 75 of
19 this Act. Any anesthesiologist assistant whose license is in an
20 inactive status shall not practice in the State of Illinois.
21 Any licensee who shall engage in practice while his or her
22 license is lapsed or on inactive status shall be considered to
23 be practicing without a license, which shall be grounds for
24 discipline under Section 95 of this Act.

1 Section 85. Roster. The Department shall maintain a roster
2 of the names and addresses of all licensees and of all persons
3 whose licenses have been suspended or revoked. This roster
4 shall be available upon written request and payment of the
5 required fee.

6 Section 90. Corporate licensure prohibited. No
7 corporation, which stated purpose includes, or which
8 practices, or which holds itself out as available to practice
9 as a anesthesiologist assistant, shall be issued a license by
10 the Department, nor shall the Secretary of State approve or
11 accept articles of incorporation for such a corporation.

12 Section 95. Grounds for disciplinary action.

13 (a) The Department may refuse to issue or to renew, or may
14 revoke, suspend, place on probation, censure, or reprimand, or
15 may take other disciplinary or non-disciplinary action with
16 regard to any license issued under this Act as the Department
17 may deem proper, including the issuance of fines not to exceed
18 \$10,000 for each violation, for any one or combination of the
19 following:

20 (1) Material misstatement in furnishing information to
21 the Department.

22 (2) Violations of this Act or the rules adopted under
23 this Act.

24 (3) Conviction of or entry of a plea of guilty or nolo

1 contendere to any crime that is a felony under the laws of
2 the United States or any state or territory thereof or that
3 is a misdemeanor of which an essential element is
4 dishonesty or that is directly related to the practice of
5 the profession.

6 (4) Making any misrepresentation for the purpose of
7 obtaining licenses.

8 (5) Professional incompetence.

9 (6) Aiding or assisting another person in violating any
10 provision of this Act or its rules.

11 (7) Failing, within 60 days, to provide information in
12 response to a written request made by the Department.

13 (8) Engaging in dishonorable, unethical, or
14 unprofessional conduct, as defined by rule, of a character
15 likely to deceive, defraud, or harm the public.

16 (9) Habitual or excessive use or addiction to alcohol,
17 narcotics, stimulants, or any other chemical agent or drug
18 that results in a anesthesiologist assistant's inability
19 to practice with reasonable judgment, skill, or safety.

20 (10) Discipline by another U.S. jurisdiction or
21 foreign nation, if at least one of the grounds for
22 discipline is the same or substantially equivalent to those
23 set forth in this Section.

24 (11) Directly or indirectly giving to or receiving from
25 any person, firm, corporation, partnership, or association
26 any fee, commission, rebate or other form of compensation

1 for any professional services not actually or personally
2 rendered. Nothing in this paragraph (11) affects any bona
3 fide independent contractor or employment arrangements,
4 which may include provisions for compensation, health
5 insurance, pension, or other employment benefits, with
6 persons or entities authorized under this Act for the
7 provision of services within the scope of the licensee's
8 practice under this Act.

9 (12) A finding by the Disciplinary Board that the
10 licensee, after having his or her license placed on
11 probationary status has violated the terms of probation.

12 (13) Abandonment of a patient.

13 (14) Willfully making or filing false records or
14 reports in his or her practice, including, but not limited
15 to, false records filed with state agencies or departments.

16 (15) Willfully failing to report an instance of
17 suspected child abuse or neglect as required by the Abused
18 and Neglected Child Reporting Act.

19 (16) Physical illness, or mental illness or impairment
20 that results in the inability to practice the profession
21 with reasonable judgment, skill, or safety, including, but
22 not limited to, deterioration through the aging process or
23 loss of motor skill.

24 (17) Being named as a perpetrator in an indicated
25 report by the Department of Children and Family Services
26 under the Abused and Neglected Child Reporting Act, and

1 upon proof by clear and convincing evidence that the
2 licensee has caused a child to be an abused child or
3 neglected child as defined in the Abused and Neglected
4 Child Reporting Act.

5 (18) Gross negligence resulting in permanent injury or
6 death of a patient.

7 (19) Employment of fraud, deception, or any unlawful
8 means in applying for or securing a license as a
9 anesthesiologist assistant.

10 (20) Exceeding the authority delegated to him or her by
11 his or her supervising physician.

12 (21) Immoral conduct in the commission of any act, such
13 as sexual abuse, sexual misconduct or sexual exploitation
14 related to the licensee's practice.

15 (22) Practicing under a false or assumed name, except
16 as provided by law.

17 (23) Making a false or misleading statement regarding
18 his or her skill or the efficacy or value of the medicine,
19 treatment, or remedy prescribed by him or her in the course
20 of treatment.

21 (24) Allowing another person to use his or her license
22 to practice.

23 (25) A pattern of practice or other behavior that
24 demonstrates incapacity or incompetence to practice under
25 this Act.

26 (b) The Department may, without a hearing, refuse to issue

1 or renew or may suspend the license of any person who fails to
2 file a return, or to pay the tax, penalty or interest shown in
3 a filed return, or to pay any final assessment of the tax,
4 penalty, or interest as required by any tax Act administered by
5 the Illinois Department of Revenue, until such time as the
6 requirements of any such tax Act are satisfied.

7 (c) The determination by a circuit court that a licensee is
8 subject to involuntary admission or judicial admission as
9 provided in the Mental Health and Developmental Disabilities
10 Code operates as an automatic suspension. The suspension will
11 end only upon a finding by a court that the patient is no
12 longer subject to involuntary admission or judicial admission
13 and issues an order so finding and discharging the patient, and
14 upon the recommendation of the Disciplinary Board to the
15 Secretary that the licensee be allowed to resume his or her
16 practice.

17 (d) In enforcing this Section, the Department upon a
18 showing of a possible violation may compel an individual
19 licensed to practice under this Act, or who has applied for
20 licensure under this Act, to submit to a mental or physical
21 examination, or both, as required by and at the expense of the
22 Department. The Department may order the examining physician to
23 present testimony concerning the mental or physical
24 examination of the licensee or applicant. No information shall
25 be excluded by reason of any common law or statutory privilege
26 relating to communications between the licensee or applicant

1 and the examining physician. The examining physicians shall be
2 specifically designated by the Department. The individual to be
3 examined may have, at his or her own expense, another physician
4 of his or her choice present during all aspects of this
5 examination. Failure of an individual to submit to a mental or
6 physical examination, when directed, shall be grounds for
7 suspension of his or her license until the individual submits
8 to the examination if the Department finds, after notice and
9 hearing, that the refusal to submit to the examination was
10 without reasonable cause.

11 If the Department finds an individual unable to practice
12 because of the reasons set forth in this Section, the
13 Department may require that individual to submit to care,
14 counseling, or treatment by physicians approved or designated
15 by the Department, as a condition, term, or restriction for
16 continued, reinstated, or renewed licensure to practice; or, in
17 lieu of care, counseling, or treatment, the Department may file
18 a complaint to immediately suspend, revoke, or otherwise
19 discipline the license of the individual. An individual whose
20 license was granted, continued, reinstated, renewed,
21 disciplined, or supervised subject to such terms, conditions,
22 or restrictions, and who fails to comply with such terms,
23 conditions, or restrictions, shall be referred to the Secretary
24 for a determination as to whether the individual shall have his
25 or her license suspended immediately, pending a hearing by the
26 Department.

1 In instances in which the Secretary immediately suspends a
2 person's license under this Section, a hearing on that person's
3 license must be convened by the Department within 30 days after
4 the suspension and completed without appreciable delay. The
5 Department shall have the authority to review the subject
6 individual's record of treatment and counseling regarding the
7 impairment to the extent permitted by applicable federal
8 statutes and regulations safeguarding the confidentiality of
9 medical records.

10 An individual licensed under this Act and affected under
11 this Section shall be afforded an opportunity to demonstrate to
12 the Department that he or she can resume practice in compliance
13 with acceptable and prevailing standards under the provisions
14 of his or her license.

15 Section 100. Suspension of license for failure to pay
16 restitution. The Department, without further process or
17 hearing, shall suspend the license or other authorization to
18 practice of any person issued under this Act who has been
19 certified by court order as not having paid restitution to a
20 person under Section 8A-3.5 of the Illinois Public Aid Code or
21 under Section 17-10.5 or 46-1 of the Criminal Code of 1961 or
22 the Criminal Code of 2012. A person whose license or other
23 authorization to practice is suspended under this Section is
24 prohibited from practicing until the restitution is made in
25 full.

1 Section 105. Returned checks; fines. Any person who
2 delivers a check or other payment to the Department that is
3 returned to the Department unpaid by the financial institution
4 upon which it is drawn shall pay to the Department, in addition
5 to the amount already owed to the Department, a fine of \$50.
6 The fines imposed by this Section are in addition to any other
7 discipline provided under this Act for unlicensed practice or
8 practice on a nonrenewed license. The Department shall notify
9 the person that payment of fees and fines shall be paid to the
10 Department by certified check or money order within 30 calendar
11 days of the notification. If, after the expiration of 30 days
12 from the date of the notification, the person has failed to
13 submit the necessary remittance, the Department shall
14 automatically terminate the license or certificate or deny the
15 application, without hearing. If, after termination or denial,
16 the person seeks a license or certificate, he or she shall
17 apply to the Department for restoration or issuance of the
18 license or certificate and pay all fees and fines due to the
19 Department. The Department may establish a fee for the
20 processing of an application for restoration of a license or
21 certificate to pay all expenses of processing this application.
22 The Secretary may waive the fines due under this Section in
23 individual cases where the Secretary finds that the fines would
24 be unreasonable or unnecessarily burdensome.

1 Section 110. Injunction.

2 (a) If any person violates the provision of this Act, the
3 Secretary may, in the name of the People of the State of
4 Illinois, through the Attorney General of the State of
5 Illinois, or the State's Attorney of any county in which the
6 action is brought, petition for an order enjoining the
7 violation or for an order enforcing compliance with this Act.
8 Upon the filing of a verified petition in court, the court may
9 issue a temporary restraining order, without notice or bond,
10 and may preliminarily and permanently enjoin such violation,
11 and if it is established that such person has violated or is
12 violating the injunction, the Court may punish the offender for
13 contempt of court. Proceedings under this Section shall be in
14 addition to, and not in lieu of, all other remedies and
15 penalties provided by this Act.

16 (b) If any person shall practice as an anesthesiologist
17 assistant or hold himself or herself out as an anesthesiologist
18 assistant without being licensed under the provisions of this
19 Act, then any licensed anesthesiologist assistant, any
20 interested party or any person injured thereby may, in addition
21 to the Secretary, petition for relief as provided in subsection
22 (a) of this Section.

23 (c) Whenever in the opinion of the Department any person
24 violates any provision of this Act, the Department may issue a
25 rule to show cause why an order to cease and desist should not
26 be entered against the person. The rule shall clearly set forth

1 the grounds relied upon by the Department and shall provide a
2 period of 7 days from the date of the rule to file an answer to
3 the satisfaction of the Department. Failure to answer to the
4 satisfaction of the Department shall cause an order to cease
5 and desist to be issued forthwith.

6 Section 115. Investigations; notice and hearing. The
7 Department may investigate the actions of any applicant or of
8 any person or persons holding or claiming to hold a license.
9 The Department shall, before suspending, revoking, placing on
10 probationary status, or taking any other disciplinary action as
11 the Department may deem proper with regard to any license, at
12 least 30 days prior to the date set for the hearing, notify the
13 applicant or licensee in writing of any charges made and the
14 time and place for a hearing of the charges before the
15 Disciplinary Board, direct him or her to file his or her
16 written answer thereto to the Disciplinary Board under oath
17 within 20 days after the service on him or her of such notice
18 and inform him or her that if he or she fails to file such
19 answer default will be taken against him or her and his or her
20 license may be suspended, revoked, placed on probationary
21 status, or have other disciplinary action, including limiting
22 the scope, nature or extent of his or her practice, as the
23 Department may deem proper taken with regard thereto. Written
24 notice may be served by personal delivery or certified or
25 registered mail to the applicant or licensee at his or her last

1 address of record with the Department. At the time and place
2 fixed in the notice, the Department shall proceed to hear the
3 charges and the parties or their counsel shall be accorded
4 ample opportunity to present such statements, testimony,
5 evidence, and argument as may be pertinent to the charges or to
6 the defense thereto. The Department may continue such hearing
7 from time to time. In case the applicant or licensee, after
8 receiving notice, fails to file an answer, his or her license
9 may in the discretion of the Secretary, having received first
10 the recommendation of the Disciplinary Board, be suspended,
11 revoked, placed on probationary status, or the Secretary may
12 take whatever disciplinary action as he or she may deem proper,
13 including limiting the scope, nature, or extent of such
14 person's practice, without a hearing, if the act or acts
15 charged constitute sufficient grounds for such action under
16 this Act. The written notice may be served by personal delivery
17 or by certified mail to the accused's address of record.

18 Section 120. Record of proceedings. The Department, at its
19 expense, shall preserve a record of all proceedings at the
20 formal hearing of any case involving the refusal to issue or
21 renew or discipline of a license. The notice of hearing,
22 complaint, and all other documents in the nature of pleadings
23 and written motions filed in the proceedings, the transcript of
24 testimony, the report of the Disciplinary Board or hearing
25 officer, and orders of the Department shall be the record of

1 the proceeding.

2 Section 125. Attendance of witnesses; production of
3 documents. Any circuit court may, upon application of the
4 Department or its designee or of the applicant or licensee
5 against whom proceedings pursuant to Section 115 of this Act
6 are pending, enter an order requiring the attendance of
7 witnesses and their testimony and the production of documents,
8 papers, files, books, and records in connection with any
9 hearing or investigation. The court may compel obedience to its
10 order by proceedings for contempt.

11 Section 130. Subpoena power; oaths. The Department shall
12 have power to subpoena and bring before it any person and to
13 take testimony either orally or by deposition or both, with the
14 same fees and mileage and in the same manner as prescribed by
15 law in judicial proceedings in civil cases in circuit courts of
16 this State.

17 The Secretary, the designated hearing officer, and any
18 member of the Disciplinary Board designated by the Secretary
19 shall each have power to administer oaths to witnesses at any
20 hearing which the Department is authorized to conduct under
21 this Act and any other oaths required or authorized to be
22 administered by the Department under this Act.

23 Section 135. Findings and recommendations. At the

1 conclusion of the hearing the Disciplinary Board shall present
2 to the Secretary a written report of its findings of fact,
3 conclusions of law and recommendations. The report shall
4 contain a finding whether or not the accused person violated
5 this Act or failed to comply with the conditions required in
6 this Act. The Disciplinary Board shall specify the nature of
7 the violation or failure to comply, and shall make its
8 recommendations to the Secretary.

9 The report of findings of fact, conclusions of law and
10 recommendation of the Disciplinary Board shall be the basis for
11 the Department's order or refusal or for the granting of a
12 license or permit. If the Secretary disagrees in any regard
13 with the report of the Disciplinary Board, the Secretary may
14 issue an order in contravention thereof. The Secretary shall
15 provide a written report to the Disciplinary Board on any
16 deviation, and shall specify with particularity the reasons for
17 such action in the final order. The finding is not admissible
18 in evidence against the person in a criminal prosecution
19 brought for the violation of this Act, but the hearing and
20 finding are not a bar to a criminal prosecution brought for the
21 violation of this Act.

22 Section 140. Hearing officer. Notwithstanding the
23 provisions of Section 115 of this Act, the Secretary shall have
24 the authority to appoint any attorney duly licensed to practice
25 law in the State of Illinois to serve as the hearing officer in

1 any action for refusal to issue or renew, or for discipline of,
2 a license. The Secretary shall notify the Disciplinary Board of
3 any such appointment. The hearing officer shall have full
4 authority to conduct the hearing. The hearing officer shall
5 report his or her findings of fact, conclusions of law, and
6 recommendations to the Disciplinary Board and the Secretary.
7 The Disciplinary Board shall have 60 days from receipt of the
8 report to review the report of the hearing officer and present
9 their findings of fact, conclusions of law, and recommendations
10 to the Secretary. If the Disciplinary Board fails to present
11 its report within the 60 day period, the respondent may request
12 in writing a direct appeal to the Secretary, in which case the
13 Secretary shall, within 7 calendar days after the request,
14 issue an order directing the Disciplinary Board to issue its
15 findings of fact, conclusions of law, and recommendations to
16 the Secretary within 30 calendar days after such order. If the
17 Disciplinary Board fails to issue its findings of fact,
18 conclusions of law, and recommendations within that time frame
19 to the Secretary after the entry of such order, the Secretary
20 shall, within 30 calendar days thereafter, issue an order based
21 upon the report of the hearing officer and the record of the
22 proceedings or issue an order remanding the matter back to the
23 hearing officer for additional proceedings in accordance with
24 the order. If (i) a direct appeal is requested, (ii) the
25 Disciplinary Board fails to issue its findings of fact,
26 conclusions of law, and recommendations within the 30-day

1 mandate from the Secretary or the Secretary fails to order the
2 Disciplinary Board to do so, and (iii) the Secretary fails to
3 issue an order within 30 calendar days thereafter, then the
4 hearing officer's report is deemed accepted and a final
5 decision of the Secretary. Notwithstanding any other provision
6 of this Section, if the Secretary, upon review, determines that
7 substantial justice has not been done in the revocation,
8 suspension, or refusal to issue or renew a license or other
9 disciplinary action taken as the result of the entry of the
10 hearing officer's report, the Secretary may order a rehearing
11 by the same or other examiners. If the Secretary disagrees in
12 any regard with the report of the Disciplinary Board or hearing
13 officer, he or she may issue an order in contravention thereof.
14 The Secretary shall provide a written explanation to the
15 Disciplinary Board on any such deviation, and shall specify
16 with particularity the reasons for such action in the final
17 order.

18 Section 145. Board; rehearing. In any case involving the
19 refusal to issue or renew or discipline of a license, a copy of
20 the Disciplinary Board's report shall be served upon the
21 respondent by the Department, either personally or as provided
22 in this Act for the service of the notice of hearing. Within 20
23 days after such service, the respondent may present to the
24 Department a motion in writing for a rehearing, which motion
25 shall specify the particular grounds therefor. If no motion for

1 rehearing is filed, then upon the expiration of the time
2 specified for filing such a motion, or if a motion for
3 rehearing is denied, then upon such denial the Secretary may
4 enter an order in accordance with recommendations of the
5 Disciplinary Board except as provided in Section 130 or 135 of
6 this Act. If the respondent shall order from the reporting
7 service, and pay for a transcript of the record within the time
8 for filing a motion for rehearing, the 20-day period within
9 which such a motion may be filed shall commence upon the
10 delivery of the transcript to the respondent.

11 Section 150. Secretary; rehearing. Whenever the Secretary
12 is satisfied that substantial justice has not been done in the
13 revocation, suspension or refusal to issue or renew a license,
14 the Secretary may order a rehearing by the same or another
15 hearing officer or Disciplinary Board.

16 Section 155. Order or certified copy; prima facie proof. An
17 order or a certified copy thereof, over the seal of the
18 Department and purporting to be signed by the Secretary, shall
19 be prima facie proof that:

20 (1) the signature is the genuine signature of the
21 Secretary;

22 (2) the Secretary is duly appointed and qualified; and

23 (3) the Disciplinary Board and the members thereof are
24 qualified to act.

1 Section 160. Restoration of license. At any time after the
2 suspension or revocation of any license the Department may
3 restore it to the licensee, unless after an investigation and a
4 hearing, the Department determines that restoration is not in
5 the public interest. Where circumstances of suspension or
6 revocation so indicate, the Department may require an
7 examination of the licensee prior to restoring his or her
8 license.

9 Section 165. Surrender of license. Upon the revocation or
10 suspension of any license, the licensee shall immediately
11 surrender the license to the Department. If the licensee fails
12 to do so, the Department shall have the right to seize the
13 license.

14 Section 170. Temporary suspension of a license. The
15 Secretary may temporarily suspend the license of a
16 anesthesiologist assistant without a hearing, simultaneously
17 with the institution of proceedings for a hearing provided for
18 in Section 115 of this Act if the Secretary finds that evidence
19 in his possession indicates that continuation in practice would
20 constitute an imminent danger to the public. In the event that
21 the Secretary suspends, temporarily, the license without a
22 hearing, a hearing by the Department must be held within 30
23 days after such suspension has occurred and concluded without

1 appreciable delay.

2 Section 175. Administrative review; venue; certification
3 of record. All final administrative decisions of the
4 Department are subject to judicial review pursuant to the
5 provisions of the Administrative Review Law, and all rules
6 adopted pursuant thereto. The term "administrative decision"
7 is defined as in Section 3-101 of the Code of Civil Procedure.

8 Proceedings for judicial review shall be commenced in the
9 circuit court of the county in which the party applying for
10 review resides; but if the party is not a resident of this
11 State, venue shall be in Sangamon County.

12 The Department shall not be required to certify any record
13 to the court or file any answer in court or otherwise appear in
14 any court in a judicial review proceeding, unless and until the
15 Department has received from the plaintiff payment of the costs
16 of furnishing and certifying the record, which costs shall be
17 determined by the Department. Failure on the part of the
18 plaintiff to file a receipt in court shall be grounds for
19 dismissal of the action.

20 Section 180. Penalties. A person who is found to have
21 violated any provision of this Act is guilty of a Class A
22 misdemeanor for the first offense and a Class 4 felony for the
23 second and any subsequent offense.

1 Section 185. Confidentiality. All information collected by
2 the Department in the course of an examination or investigation
3 of a licensee or applicant, including, but not limited to, any
4 complaint against a licensee filed with the Department and
5 information collected to investigate any such complaint, shall
6 be maintained for the confidential use of the Department and
7 shall not be disclosed. The Department may not disclose the
8 information to anyone other than law enforcement officials,
9 other regulatory agencies that have an appropriate regulatory
10 interest as determined by the Secretary, or to a party
11 presenting a lawful subpoena to the Department. Information and
12 documents disclosed to a federal, State, county, or local law
13 enforcement agency shall not be disclosed by the agency for any
14 purpose to any other agency or person. A formal complaint filed
15 against a licensee by the Department or any order issued by the
16 Department against a licensee or applicant shall be a public
17 record, except as otherwise prohibited by law.

18 Section 190. Home rule. The regulation and licensing of
19 anesthesiologist assistants is an exclusive power and function
20 of the State. A home rule unit may not regulate or license
21 anesthesiologist assistants. This Section is a denial and
22 limitation of home rule powers and functions under subsection
23 (h) of Section 6 of Article VII of the Illinois Constitution.

24 Section 900. The Regulatory Sunset Act is amended by adding

1 Section 4.36 as follows:

2 (5 ILCS 80/4.36 new)

3 Sec. 4.36. Act repealed on January 1, 2026. The following
4 Act is repealed on January 1, 2026:

5 The Anesthesiologist Assistant Practice Act.

6 Section 905. The Ambulatory Surgical Treatment Center Act
7 is amended by changing Section 6.5 as follows:

8 (210 ILCS 5/6.5)

9 Sec. 6.5. Clinical privileges; advanced practice nurses.
10 All ambulatory surgical treatment centers (ASTC) licensed
11 under this Act shall comply with the following requirements:

12 (1) No ASTC policy, rule, regulation, or practice shall be
13 inconsistent with the provision of adequate collaboration and
14 consultation in accordance with Section 54.5 of the Medical
15 Practice Act of 1987.

16 (2) Operative surgical procedures shall be performed only
17 by a physician licensed to practice medicine in all its
18 branches under the Medical Practice Act of 1987, a dentist
19 licensed under the Illinois Dental Practice Act, or a podiatric
20 physician licensed under the Podiatric Medical Practice Act of
21 1987, with medical staff membership and surgical clinical
22 privileges granted by the consulting committee of the ASTC. A
23 licensed physician, dentist, or podiatric physician may be

1 assisted by a physician licensed to practice medicine in all
2 its branches, dentist, dental assistant, podiatric physician,
3 licensed advanced practice nurse, licensed physician
4 assistant, licensed registered nurse, licensed practical
5 nurse, licensed anesthesiologist assistant, surgical
6 assistant, surgical technician, or other individuals granted
7 clinical privileges to assist in surgery by the consulting
8 committee of the ASTC. Payment for services rendered by an
9 assistant in surgery who is not an ambulatory surgical
10 treatment center employee shall be paid at the appropriate
11 non-physician modifier rate if the payor would have made
12 payment had the same services been provided by a physician.

13 (2.5) A registered nurse licensed under the Nurse Practice
14 Act and qualified by training and experience in operating room
15 nursing shall be present in the operating room and function as
16 the circulating nurse during all invasive or operative
17 procedures. For purposes of this paragraph (2.5), "circulating
18 nurse" means a registered nurse who is responsible for
19 coordinating all nursing care, patient safety needs, and the
20 needs of the surgical team in the operating room during an
21 invasive or operative procedure.

22 (3) An advanced practice nurse is not required to possess
23 prescriptive authority or a written collaborative agreement
24 meeting the requirements of the Nurse Practice Act to provide
25 advanced practice nursing services in an ambulatory surgical
26 treatment center. An advanced practice nurse must possess

1 clinical privileges granted by the consulting medical staff
2 committee and ambulatory surgical treatment center in order to
3 provide services. Individual advanced practice nurses may also
4 be granted clinical privileges to order, select, and administer
5 medications, including controlled substances, to provide
6 delineated care. The attending physician must determine the
7 advance practice nurse's role in providing care for his or her
8 patients, except as otherwise provided in the consulting staff
9 policies. The consulting medical staff committee shall
10 periodically review the services of advanced practice nurses
11 granted privileges.

12 (4) The anesthesia service shall be under the direction of
13 a physician licensed to practice medicine in all its branches
14 who has had specialized preparation or experience in the area
15 or who has completed a residency in anesthesiology. An
16 anesthesiologist, Board certified or Board eligible, is
17 recommended. Anesthesia services may only be administered
18 pursuant to the order of a physician licensed to practice
19 medicine in all its branches, licensed dentist, or licensed
20 podiatric physician.

21 (A) The individuals who, with clinical privileges
22 granted by the medical staff and ASTC, may administer
23 anesthesia services are limited to the following:

24 (i) an anesthesiologist; or

25 (ii) a physician licensed to practice medicine in
26 all its branches; or

1 (iii) a dentist with authority to administer
2 anesthesia under Section 8.1 of the Illinois Dental
3 Practice Act; or

4 (iv) a licensed certified registered nurse
5 anesthetist; or

6 (v) a podiatric physician licensed under the
7 Podiatric Medical Practice Act of 1987.

8 (vi) a licensed anesthesiologist assistant under
9 the supervision of an anesthesiologist.

10 (B) For anesthesia services, an anesthesiologist shall
11 participate through discussion of and agreement with the
12 anesthesia plan and shall remain physically present and be
13 available on the premises during the delivery of anesthesia
14 services for diagnosis, consultation, and treatment of
15 emergency medical conditions. In the absence of 24-hour
16 availability of anesthesiologists with clinical
17 privileges, an alternate policy (requiring participation,
18 presence, and availability of a physician licensed to
19 practice medicine in all its branches) shall be developed
20 by the medical staff consulting committee in consultation
21 with the anesthesia service and included in the medical
22 staff consulting committee policies.

23 (C) A certified registered nurse anesthetist is not
24 required to possess prescriptive authority or a written
25 collaborative agreement meeting the requirements of
26 Section 65-35 of the Nurse Practice Act to provide

1 anesthesia services ordered by a licensed physician,
2 dentist, or podiatric physician. Licensed certified
3 registered nurse anesthetists are authorized to select,
4 order, and administer drugs and apply the appropriate
5 medical devices in the provision of anesthesia services
6 under the anesthesia plan agreed with by the
7 anesthesiologist or, in the absence of an available
8 anesthesiologist with clinical privileges, agreed with by
9 the operating physician, operating dentist, or operating
10 podiatric physician in accordance with the medical staff
11 consulting committee policies of a licensed ambulatory
12 surgical treatment center.

13 (Source: P.A. 98-214, eff. 8-9-13.)

14 Section 910. The Hospital Licensing Act is amended by
15 changing Section 10.7 as follows:

16 (210 ILCS 85/10.7)

17 Sec. 10.7. Clinical privileges; advanced practice nurses.
18 All hospitals licensed under this Act shall comply with the
19 following requirements:

20 (1) No hospital policy, rule, regulation, or practice shall
21 be inconsistent with the provision of adequate collaboration
22 and consultation in accordance with Section 54.5 of the Medical
23 Practice Act of 1987.

24 (2) Operative surgical procedures shall be performed only

1 by a physician licensed to practice medicine in all its
2 branches under the Medical Practice Act of 1987, a dentist
3 licensed under the Illinois Dental Practice Act, or a podiatric
4 physician licensed under the Podiatric Medical Practice Act of
5 1987, with medical staff membership and surgical clinical
6 privileges granted at the hospital. A licensed physician,
7 dentist, or podiatric physician may be assisted by a physician
8 licensed to practice medicine in all its branches, dentist,
9 dental assistant, podiatric physician, licensed advanced
10 practice nurse, licensed physician assistant, licensed
11 registered nurse, licensed practical nurse, licensed
12 anesthesiologist assistant, surgical assistant, surgical
13 technician, or other individuals granted clinical privileges
14 to assist in surgery at the hospital. Payment for services
15 rendered by an assistant in surgery who is not a hospital
16 employee shall be paid at the appropriate non-physician
17 modifier rate if the payor would have made payment had the same
18 services been provided by a physician.

19 (2.5) A registered nurse licensed under the Nurse Practice
20 Act and qualified by training and experience in operating room
21 nursing shall be present in the operating room and function as
22 the circulating nurse during all invasive or operative
23 procedures. For purposes of this paragraph (2.5), "circulating
24 nurse" means a registered nurse who is responsible for
25 coordinating all nursing care, patient safety needs, and the
26 needs of the surgical team in the operating room during an

1 invasive or operative procedure.

2 (3) An advanced practice nurse is not required to possess
3 prescriptive authority or a written collaborative agreement
4 meeting the requirements of the Nurse Practice Act to provide
5 advanced practice nursing services in a hospital. An advanced
6 practice nurse must possess clinical privileges recommended by
7 the medical staff and granted by the hospital in order to
8 provide services. Individual advanced practice nurses may also
9 be granted clinical privileges to order, select, and administer
10 medications, including controlled substances, to provide
11 delineated care. The attending physician must determine the
12 advanced practice nurse's role in providing care for his or her
13 patients, except as otherwise provided in medical staff bylaws.
14 The medical staff shall periodically review the services of
15 advanced practice nurses granted privileges. This review shall
16 be conducted in accordance with item (2) of subsection (a) of
17 Section 10.8 of this Act for advanced practice nurses employed
18 by the hospital.

19 (4) The anesthesia service shall be under the direction of
20 a physician licensed to practice medicine in all its branches
21 who has had specialized preparation or experience in the area
22 or who has completed a residency in anesthesiology. An
23 anesthesiologist, Board certified or Board eligible, is
24 recommended. Anesthesia services may only be administered
25 pursuant to the order of a physician licensed to practice
26 medicine in all its branches, licensed dentist, or licensed

1 podiatric physician.

2 (A) The individuals who, with clinical privileges
3 granted at the hospital, may administer anesthesia
4 services are limited to the following:

5 (i) an anesthesiologist; or

6 (ii) a physician licensed to practice medicine in
7 all its branches; or

8 (iii) a dentist with authority to administer
9 anesthesia under Section 8.1 of the Illinois Dental
10 Practice Act; or

11 (iv) a licensed certified registered nurse
12 anesthetist; or

13 (v) a podiatric physician licensed under the
14 Podiatric Medical Practice Act of 1987.

15 (vi) a licensed anesthesiologist assistant under
16 the supervision of an anesthesiologist.

17 (B) For anesthesia services, an anesthesiologist shall
18 participate through discussion of and agreement with the
19 anesthesia plan and shall remain physically present and be
20 available on the premises during the delivery of anesthesia
21 services for diagnosis, consultation, and treatment of
22 emergency medical conditions. In the absence of 24-hour
23 availability of anesthesiologists with medical staff
24 privileges, an alternate policy (requiring participation,
25 presence, and availability of a physician licensed to
26 practice medicine in all its branches) shall be developed

1 by the medical staff and licensed hospital in consultation
2 with the anesthesia service.

3 (C) A certified registered nurse anesthetist is not
4 required to possess prescriptive authority or a written
5 collaborative agreement meeting the requirements of
6 Section 65-35 of the Nurse Practice Act to provide
7 anesthesia services ordered by a licensed physician,
8 dentist, or podiatric physician. Licensed certified
9 registered nurse anesthetists are authorized to select,
10 order, and administer drugs and apply the appropriate
11 medical devices in the provision of anesthesia services
12 under the anesthesia plan agreed with by the
13 anesthesiologist or, in the absence of an available
14 anesthesiologist with clinical privileges, agreed with by
15 the operating physician, operating dentist, or operating
16 podiatric physician in accordance with the hospital's
17 alternative policy.

18 (Source: P.A. 98-214, eff. 8-9-13.)

19 Section 999. Effective date. This Act takes effect upon
20 becoming law.