99TH GENERAL ASSEMBLY

State of Illinois

2015 and 2016

HB3936

by Rep. Emily McAsey

SYNOPSIS AS INTRODUCED:

20 ILCS 2310/2310-314 new 55 ILCS 5/3-3013 110 ILCS 330/8.5 new 210 ILCS 85/6.09b new

from Ch. 34, par. 3-3013

Amends the Counties Code. Provides that in every case in which an opioid overdose is determined to be a contributing factor in a death, the coroner shall report the death and the age, gender, race, and county of residence, if known, of the decedent to the Department of Public Health. Amends the University of Illinois Hospital Act and the Hospital Licensing Act. Requires every hospital to report the age, gender, race, and county of residence, if known, of each patient diagnosed as having an opioid overdose to the Department within 48 hours of the diagnosis. Amends the Department of Public Health Powers and Duties Law of the Civil Administrative Code of Illinois. Requires the Department to adopt rules to implement the reporting requirements. Requires the Department to annually report to the General Assembly the data collected.

LRB099 11208 RPS 31737 b

FISCAL NOTE ACT MAY APPLY

A BILL FOR

HB3936

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AN ACT concerning regulation.

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

4 Section 5. The Department of Public Health Powers and 5 Duties Law of the Civil Administrative Code of Illinois is 6 amended by adding Section 2310-314 as follows:

7 (20 ILCS 2310/2310-314 new) Sec. 2310-314. Opioid overdose reporting. 8 9 (a) The Department shall adopt rules to implement the requirements of this amendatory Act of the 99th General 10 11 Assembly. 12 (b) The Department shall annually report to the General Assembly the data collected under this Section, Section 8.5 of 13 14 the University of Illinois Hospital Act, and Section 6.09b of the Hospital Licensing Act and the data reported to the 15 16 Department concerning deaths in which an opioid overdose is 17 determined to be a contributing factor, as required by Section 3-3013 of the Counties Code. The report shall specify the data 18 19 for each county.

20 Section 10. The Counties Code is amended by changing 21 Section 3-3013 as follows: HB3936

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(55 ILCS 5/3-3013) (from Ch. 34, par. 3-3013)

Sec. 3-3013. Preliminary investigations; blood and urine analysis; summoning jury; reports. Every coroner, whenever, as soon as he knows or is informed that the dead body of any person is found, or lying within his county, whose death is suspected of being:

7 (a) A sudden or violent death, whether apparently 8 suicidal, homicidal or accidental, including but not 9 limited to deaths apparently caused or contributed to by 10 thermal, traumatic, chemical, electrical or radiational 11 injury, or a complication of any of them, or by drowning or 12 suffocation, or as a result of domestic violence as defined 13 in the Illinois Domestic Violence Act of 1986;

14 (b) A maternal or fetal death due to abortion, or any
15 death due to a sex crime or a crime against nature;

16 (c) A death where the circumstances are suspicious, 17 obscure, mysterious or otherwise unexplained or where, in 18 the written opinion of the attending physician, the cause 19 of death is not determined;

20 (d) A death where addiction to alcohol or to any drug
21 may have been a contributory cause; or

22

may have been a contributory cause; or (e) A death where the decedent was not attended by a

22 (e) A death where the decedent was not attended by a
 23 licensed physician;

shall go to the place where the dead body is, and take charge of the same and shall make a preliminary investigation into the circumstances of the death. In the case of death without attendance by a licensed physician the body may be moved with the coroner's consent from the place of death to a mortuary in the same county. Coroners in their discretion shall notify such physician as is designated in accordance with Section 3-3014 to attempt to ascertain the cause of death, either by autopsy or otherwise.

7 In cases of accidental death involving a motor vehicle in 8 which the decedent was (1) the operator or a suspected operator 9 of a motor vehicle, or (2) a pedestrian 16 years of age or 10 older, the coroner shall require that a blood specimen of at 11 least 30 cc., and if medically possible a urine specimen of at 12 least 30 cc. or as much as possible up to 30 cc., be withdrawn 13 from the body of the decedent in a timely fashion after the accident causing his death, by such physician as has been 14 designated in accordance with Section 3-3014, or by the coroner 15 16 or deputy coroner or a qualified person designated by such 17 physician, coroner, or deputy coroner. If the county does not maintain laboratory facilities for making such analysis, the 18 blood and urine so drawn shall be sent to the Department of 19 20 State Police or any other accredited or State-certified laboratory for analysis of the alcohol, carbon monoxide, and 21 22 dangerous or narcotic drug content of such blood and urine 23 specimens. Each specimen submitted shall be accompanied by pertinent information concerning the decedent upon a form 24 25 prescribed by such laboratory. Any person drawing blood and 26 urine and any person making any examination of the blood and

1 urine under the terms of this Division shall be immune from all 2 liability, civil or criminal, that might otherwise be incurred 3 or imposed.

In all other cases coming within the jurisdiction of the 4 5 coroner and referred to in subparagraphs (a) through (e) above, blood, and whenever possible, urine samples shall be analyzed 6 7 for the presence of alcohol and other drugs. When the coroner 8 suspects that drugs may have been involved in the death, either 9 directly or indirectly, a toxicological examination shall be 10 performed which may include analyses of blood, urine, bile, 11 gastric contents and other tissues. When the coroner suspects a 12 death is due to toxic substances, other than drugs, the coroner shall consult with the toxicologist prior to collection of 13 14 samples. Information submitted to the toxicologist shall 15 include information as to height, weight, age, sex and race of 16 the decedent as well as medical history, medications used by 17 and the manner of death of decedent.

When the coroner or medical examiner finds that the cause 18 19 of death is due to homicidal means, the coroner or medical 20 examiner shall cause blood and buccal specimens (tissue may be submitted if no uncontaminated blood or buccal specimen can be 21 22 obtained), whenever possible, to be withdrawn from the body of 23 the decedent in a timely fashion. Within 45 days after the 24 collection of the specimens, the coroner or medical examiner 25 shall deliver those specimens, dried, to the Illinois 26 Department of State Police, Division of Forensic Services, for

analysis and categorizing into genetic marker groupings to be 1 2 maintained by the Illinois Department of State Police in the 3 State central repository in the same manner, and subject to the same conditions, as provided in Section 5-4-3 of the Unified 4 5 Code of Corrections. The requirements of this paragraph are in addition to any other findings, specimens, or information that 6 the coroner or medical examiner is required to provide during 7 the conduct of a criminal investigation. 8

9 In all counties, in cases of apparent suicide, homicide, or 10 accidental death or in other cases, within the discretion of 11 the coroner, the coroner may summon 8 persons of lawful age 12 from those persons drawn for petit jurors in the county. The 13 summons shall command these persons to present themselves 14 personally at such a place and time as the coroner shall 15 determine, and may be in any form which the coroner shall 16 determine and may incorporate any reasonable form of request 17 for acknowledgement which the coroner deems practical and provides a reliable proof of service. The summons may be served 18 19 by first class mail. From the 8 persons so summoned, the 20 coroner shall select 6 to serve as the jury for the inquest. Inquests may be continued from time to time, as the coroner may 21 22 deem necessary. The 6 jurors selected in a given case may view 23 the body of the deceased. If at any continuation of an inquest one or more of the original jurors shall be unable to continue 24 25 to serve, the coroner shall fill the vacancy or vacancies. A 26 juror serving pursuant to this paragraph shall receive

1 compensation from the county at the same rate as the rate of 2 compensation that is paid to petit or grand jurors in the 3 county. The coroner shall furnish to each juror without fee at 4 the time of his discharge a certificate of the number of days 5 in attendance at an inquest, and, upon being presented with 6 such certificate, the county treasurer shall pay to the juror 7 the sum provided for his services.

8 In counties which have a jury commission, in cases of 9 apparent suicide or homicide or of accidental death, the 10 coroner may conduct an inquest. The jury commission shall 11 provide at least 8 jurors to the coroner, from whom the coroner 12 shall select any 6 to serve as the jury for the inquest. 13 Inquests may be continued from time to time as the coroner may 14 deem necessary. The 6 jurors originally chosen in a given case 15 may view the body of the deceased. If at any continuation of an 16 inquest one or more of the 6 jurors originally chosen shall be 17 unable to continue to serve, the coroner shall fill the vacancy or vacancies. At the coroner's discretion, additional jurors to 18 19 fill such vacancies shall be supplied by the jury commission. A 20 juror serving pursuant to this paragraph in such county shall receive compensation from the county at the same rate as the 21 22 rate of compensation that is paid to petit or grand jurors in 23 the county.

In every case in which a fire is determined to be a contributing factor in a death, the coroner shall report the death to the Office of the State Fire Marshal. The coroner

1 shall provide a copy of the death certificate (i) within 30
2 days after filing the permanent death certificate and (ii) in a
3 manner that is agreed upon by the coroner and the State Fire
4 Marshal.

5 In addition, in every case in which domestic violence is 6 determined to be a contributing factor in a death, the coroner 7 shall report the death to the Department of State Police.

8 <u>In addition, in every case in which an opioid overdose is</u> 9 <u>determined to be a contributing factor in a death, the coroner</u> 10 <u>shall report the death and the age, gender, race, and county of</u> 11 <u>residence, if known, of the decedent to the Department of</u> 12 <u>Public Health.</u>

13 All deaths in State institutions and all deaths of wards of 14 the State in private care facilities or in programs funded by 15 the Department of Human Services under its powers relating to 16 mental health and developmental disabilities or alcoholism and 17 substance abuse or funded by the Department of Children and Family Services shall be reported to the coroner of the county 18 in which the facility is located. If the coroner has reason to 19 20 believe that an investigation is needed to determine whether 21 the death was caused by maltreatment or negligent care of the 22 ward of the State, the coroner may conduct a preliminary 23 investigation of the circumstances of such death as in cases of 24 death under circumstances set forth in paragraphs (a) through 25 (e) of this Section.

26 (Source: P.A. 95-484, eff. 6-1-08; 96-1059, eff. 7-14-10.)

1	Section 15. The University of Illinois Hospital Act is
2	amended by adding Section 8.5 as follows:
3	(110 ILCS 330/8.5 new)
4	Sec. 8.5. Opioid overdose reporting. For each patient that
5	the University of Illinois Hospital diagnoses as having an
6	opioid overdose, the University of Illinois Hospital shall
7	report the age, gender, race, and county of residence, if
8	known, of that patient to the Department of Public Health, in
9	the form and manner prescribed by the Department of Public
10	Health, within 48 hours of the diagnosis.
11	Section 20. The Hospital Licensing Act is amended by adding
12	Section 6.09b as follows:
13	(210 ILCS 85/6.09b new)
14	Sec. 6.09b. Opioid overdose reporting. For each patient
15	that a hospital diagnoses as having an opioid overdose, the
16	hospital shall report the age, gender, race, and county of
17	residence, if known, of that patient to the Department, in the
18	form and manner prescribed by the Department, within 48 hours
19	of the diagnosis.