

1 AN ACT concerning health.

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

4 Section 5. The Sexual Assault Survivors Emergency  
5 Treatment Act is amended by changing Sections 1a, 2, 2.05,  
6 2.2, 3, 5, 5.1, 5.2, 5.3, 5.4, 5.5, 6.2, 6.5, 6.6, 7, 7.5, 8,  
7 and 10 and by adding Section 15 as follows:

8 (410 ILCS 70/1a) (from Ch. 111 1/2, par. 87-1a)

9 Sec. 1a. Definitions.

10 (a) In this Act:

11 "Acute sexual assault" means a sexual assault that has  
12 recently occurred. For patients under the age of 13, "acute  
13 sexual assault" means a sexual assault that has occurred  
14 within the past 72 hours. For patients 13 years old or older,  
15 "acute sexual assault" means a sexual assault that has  
16 occurred within the past 168 hours.

17 "Advanced practice registered nurse" has the meaning  
18 provided in Section 50-10 of the Nurse Practice Act.

19 "Ambulance provider" means an individual or entity that  
20 owns and operates a business or service using ambulances or  
21 emergency medical services vehicles to transport emergency  
22 patients.

23 "Approved pediatric health care facility" means a health

1 care facility, other than a hospital, with a sexual assault  
2 treatment plan approved by the Department to provide medical  
3 forensic examinations ~~services~~ to sexual assault survivors  
4 under the age of 18 who present with a complaint of acute  
5 sexual assault ~~within a minimum of the last 7 days or who have~~  
6 ~~disclosed past sexual assault by a specific individual and~~  
7 ~~were in the care of that individual within a minimum of the~~  
8 ~~last 7 days.~~

9 "Areawide sexual assault treatment plan" means a plan,  
10 developed by hospitals or by hospitals and approved pediatric  
11 health care facilities in a community or area to be served,  
12 which provides for medical forensic examinations ~~services~~ to  
13 acute sexual assault survivors that shall be made available by  
14 each of the participating hospitals and approved pediatric  
15 health care facilities.

16 "Assent" means the expressed willingness to participate in  
17 an activity or give permission.

18 "Board-certified child abuse pediatrician" means a  
19 physician certified by the American Board of Pediatrics in  
20 child abuse pediatrics.

21 "Board-eligible child abuse pediatrician" means a  
22 physician who has completed the requirements set forth by the  
23 American Board of Pediatrics to take the examination for  
24 certification in child abuse pediatrics.

25 "Department" means the Department of Public Health.

26 "Emergency contraception" means medication as approved by

1 the federal Food and Drug Administration (FDA) that can  
2 significantly reduce the risk of pregnancy if taken within 72  
3 hours after sexual assault.

4 "Follow-up healthcare" means healthcare services related  
5 to a sexual assault, including laboratory services and  
6 pharmacy services, rendered within 180 days of the initial  
7 visit as a result of the sexual assault ~~for medical forensic~~  
8 ~~services~~.

9 "Health care professional" means a physician, a physician  
10 assistant, a sexual assault forensic examiner, an advanced  
11 practice registered nurse, a registered professional nurse, a  
12 licensed practical nurse, or a sexual assault nurse examiner.

13 "Hospital" means a hospital licensed under the Hospital  
14 Licensing Act or operated under the University of Illinois  
15 Hospital Act, any outpatient center included in the hospital's  
16 sexual assault treatment plan where hospital employees provide  
17 medical forensic examinations ~~services~~, and an out-of-state  
18 hospital that has consented to the jurisdiction of the  
19 Department under Section 2.06.

20 "Illinois State Police Sexual Assault Evidence Collection  
21 Kit" means a prepackaged set of materials and forms to be used  
22 for the collection of evidence relating to sexual assault. The  
23 standardized evidence collection kit for the State of Illinois  
24 shall be the Illinois State Police Sexual Assault Evidence  
25 Collection Kit.

26 "Law enforcement agency having jurisdiction" means the law

1 enforcement agency in the jurisdiction where an alleged sexual  
2 assault or sexual abuse occurred.

3 "Licensed practical nurse" has the meaning provided in  
4 Section 50-10 of the Nurse Practice Act.

5 "Medical forensic examination services" means health care  
6 delivered to patients in ~~within or under~~ the care ~~and~~  
7 ~~supervision~~ of a qualified medical provider personnel working  
8 ~~at in a designated emergency department of a treatment~~  
9 hospital, treatment hospital with approved pediatric transfer,  
10 or an approved pediatric health care facility. "Medical  
11 forensic examination services" includes, but is not limited  
12 to, taking a medical history, performing photo documentation,  
13 performing a physical and anogenital examination, assessing  
14 the patient for evidence collection, collecting evidence in  
15 accordance with a statewide sexual assault evidence collection  
16 program administered by the Illinois State Police using the  
17 Illinois State Police Sexual Assault Evidence Collection Kit,  
18 if appropriate, assessing the patient for drug-facilitated or  
19 alcohol-facilitated sexual assault, providing an evaluation of  
20 and care for sexually transmitted infection and human  
21 immunodeficiency virus (HIV), pregnancy risk evaluation and  
22 care, and discharge and follow-up healthcare planning.

23 "Pediatric health care facility" means a clinic or  
24 physician's office that provides medical services to patients  
25 under the age of 18.

26 "Pediatric sexual assault survivor" means a person under

1 the age of 13 who presents for a medical forensic examination  
2 ~~services~~ in relation to injuries or trauma resulting from a  
3 sexual assault.

4 "Photo documentation" means digital photographs or  
5 colposcope videos stored and backed up securely in the  
6 original file format.

7 "Physician" means a person licensed to practice medicine  
8 in all its branches.

9 "Physician assistant" has the meaning provided in Section  
10 4 of the Physician Assistant Practice Act of 1987.

11 ~~"Prepubescent sexual assault survivor" means a female who~~  
12 ~~is under the age of 18 years and has not had a first menstrual~~  
13 ~~cycle or a male who is under the age of 18 years and has not~~  
14 ~~started to develop secondary sex characteristics who presents~~  
15 ~~for medical forensic services in relation to injuries or~~  
16 ~~trauma resulting from a sexual assault.~~

17 "Qualified medical provider" means a board-certified child  
18 abuse pediatrician, board-eligible child abuse pediatrician, a  
19 sexual assault forensic examiner, or a sexual assault nurse  
20 examiner who has access to photo documentation tools, and who  
21 participates in peer review.

22 "Registered Professional Nurse" has the meaning provided  
23 in Section 50-10 of the Nurse Practice Act.

24 "Sexual assault" means:

25 (1) an act of sexual conduct; as used in this  
26 paragraph, "sexual conduct" has the meaning provided under

1 Section 11-0.1 of the Criminal Code of 2012; or

2 (2) any act of sexual penetration; as used in this  
3 paragraph, "sexual penetration" has the meaning provided  
4 under Section 11-0.1 of the Criminal Code of 2012 and  
5 includes, without limitation, acts prohibited under  
6 Sections 11-1.20 through 11-1.60 of the Criminal Code of  
7 2012.

8 "Sexual assault forensic examiner" means a physician or  
9 physician assistant who has completed training that meets or  
10 is substantially similar to the Sexual Assault Nurse Examiner  
11 Education Guidelines established by the International  
12 Association of Forensic Nurses.

13 "Sexual assault nurse examiner" means an advanced practice  
14 registered nurse or registered professional nurse who is  
15 designated as Adult/Adolescent, Pediatric/Adolescent, or both,  
16 according to the population of survivors the nurse is  
17 qualified to treat and:

18 (1) is certified as a Sexual Assault Nurse Examiner by  
19 the International Association of Forensic Nurses; or

20 (2) has completed a ~~sexual assault nurse examiner~~  
21 training program that meets the Sexual Assault Nurse  
22 Examiner Education Guidelines established by the  
23 International Association of Forensic Nurses and is  
24 approved by the Sexual Assault Nurse Examiner Program  
25 Coordinator.

26 "Sexual Assault Nurse Examiner Program Coordinator" means

1 an advanced practice registered nurse or a registered  
2 professional nurse that is a qualified medical provider, and  
3 who is the employee at Attorney General's Office who oversees  
4 the Sexual Assault Nurse Examiner Program.

5 "Sexual assault services voucher" means a document  
6 generated by a hospital or approved pediatric health care  
7 facility where ~~at the time~~ the sexual assault survivor first  
8 presents and ~~receives outpatient medical forensic services~~  
9 that may be used to seek payment for any ambulance services, a  
10 medical forensic examination, medical care and treatment as  
11 defined by 77 Ill. Adm. Code Part 545 ~~services~~, laboratory  
12 services, pharmacy services, and follow-up healthcare provided  
13 as a result of the sexual assault.

14 "Sexual assault survivor" means a person who presents for  
15 a medical forensic examination or medical care and treatment  
16 ~~services~~ in relation to injuries or trauma resulting from a  
17 sexual assault.

18 "Sexual assault transfer plan" means a written plan  
19 developed by a hospital and approved by the Department, which  
20 describes the hospital's procedures for transferring acute  
21 sexual assault survivors to another hospital, and an approved  
22 pediatric health care facility, if applicable, in order to  
23 receive medical forensic examinations performed by qualified  
24 medical providers ~~services~~.

25 "Sexual assault treatment plan" means a written plan that  
26 describes the procedures and protocols for providing medical

1 forensic examinations ~~services~~ to acute sexual assault  
2 survivors who present themselves for such services performed  
3 by qualified medical providers, either directly or through  
4 transfer from a hospital or an approved pediatric health care  
5 facility.

6 "Transfer hospital" means a hospital with a sexual assault  
7 transfer plan approved by the Department.

8 "Transfer services" means the appropriate medical  
9 screening examination and necessary stabilizing treatment  
10 prior to the transfer of a sexual assault survivor to another a  
11 hospital or an approved pediatric health care facility ~~that~~  
12 ~~provides medical forensic services to sexual assault survivors~~  
13 pursuant to a sexual assault treatment plan or areawide sexual  
14 assault treatment plan.

15 "Treatment hospital" means a hospital with a sexual  
16 assault treatment plan approved by the Department to provide  
17 medical forensic examinations ~~services~~ to acute ~~all~~ sexual  
18 assault survivors ~~who present with a complaint of sexual~~  
19 ~~assault within a minimum of the last 7 days or who have~~  
20 ~~disclosed past sexual assault by a specific individual and~~  
21 ~~were in the care of that individual within a minimum of the~~  
22 ~~last 7 days.~~

23 "Treatment hospital with approved pediatric transfer"  
24 means a hospital with a treatment plan approved by the  
25 Department to provide medical forensic examinations ~~services~~  
26 to sexual assault survivors 13 years old or older who present

1 with a complaint of acute sexual assault ~~within a minimum of~~  
2 ~~the last 7 days or who have disclosed past sexual assault by a~~  
3 ~~specific individual and were in the care of that individual~~  
4 ~~within a minimum of the last 7 days.~~

5 (b) This Section is effective on and after January 1,  
6 2024.

7 (Source: P.A. 102-22, eff. 6-25-21; 102-538, eff. 8-20-21;  
8 102-674, eff. 11-30-21; 102-813, eff. 5-13-22; 102-1097, eff.  
9 1-1-23; 102-1106, eff. 1-1-23; 103-154, eff. 6-30-23.)

10 (410 ILCS 70/2) (from Ch. 111 1/2, par. 87-2)

11 Sec. 2. Hospital and approved pediatric health care  
12 facility requirements for sexual assault plans.

13 (a) Every hospital required to be licensed by the  
14 Department pursuant to the Hospital Licensing Act, or operated  
15 under the University of Illinois Hospital Act that provides  
16 general medical and surgical hospital services shall provide  
17 either (i) transfer services to all acute sexual assault  
18 survivors, (ii) medical forensic examinations ~~services~~ to all  
19 acute sexual assault survivors, or (iii) transfer services to  
20 pediatric acute sexual assault survivors and medical forensic  
21 examinations ~~services~~ to acute sexual assault survivors 13  
22 years old or older, in accordance with rules adopted by the  
23 Department.

24 In addition, every such hospital, regardless of whether or  
25 not a request is made for reimbursement, shall submit to the

1 Department a plan to provide either (i) transfer services to  
2 all acute sexual assault survivors, (ii) medical forensic  
3 examinations services to all acute sexual assault survivors,  
4 or (iii) transfer services to pediatric acute sexual assault  
5 survivors and medical forensic examinations services to acute  
6 sexual assault survivors 13 years old or older within the time  
7 frame established by the Department. The Department shall  
8 approve such plan for either (i) transfer services to all  
9 acute sexual assault survivors, (ii) medical forensic  
10 examinations services to all acute sexual assault survivors,  
11 or (iii) transfer services to pediatric acute sexual assault  
12 survivors and medical forensic examinations services to acute  
13 sexual assault survivors 13 years old or older, if it finds  
14 that the implementation of the proposed plan would provide (i)  
15 transfer services or (ii) medical forensic examinations  
16 services for acute sexual assault survivors in accordance with  
17 the requirements of this Act and provide sufficient  
18 protections from the risk of pregnancy to acute sexual assault  
19 survivors. Notwithstanding anything to the contrary in this  
20 paragraph, the Department may approve a sexual assault  
21 transfer plan for the provision of medical forensic  
22 examinations services if:

23 (1) a treatment hospital with approved pediatric  
24 transfer has agreed, as part of an areawide treatment  
25 plan, to accept acute sexual assault survivors 13 years of  
26 age or older from the proposed transfer hospital, if the

1 treatment hospital with approved pediatric transfer is  
2 geographically closer to the transfer hospital than a  
3 treatment hospital or another treatment hospital with  
4 approved pediatric transfer and such transfer is not  
5 unduly burdensome on the sexual assault survivor; and

6 (2) a treatment hospital has agreed, as a part of an  
7 areawide treatment plan, to accept acute sexual assault  
8 survivors under 13 years of age from the proposed transfer  
9 hospital and transfer to the treatment hospital would not  
10 unduly burden the sexual assault survivor.

11 The Department may not approve a sexual assault transfer  
12 plan unless a treatment hospital has agreed, as a part of an  
13 areawide treatment plan, to accept acute sexual assault  
14 survivors from the proposed transfer hospital and a transfer  
15 to the treatment hospital would not unduly burden the sexual  
16 assault survivor.

17 In determining whether to approve a sexual assault  
18 transfer plan under this subsection, the Department shall  
19 evaluate whether the proposed plan would result in unduly  
20 burdensome patient transfers. To avoid unduly burdensome  
21 patient transfers, the Department shall consider the following  
22 factors in approving or denying the proposed sexual assault  
23 transfer plan:

24 (1) geographic proximity to the treatment hospital or  
25 treatment hospital with approved pediatric transfer, with  
26 priority given to sexual assault transfer plans which

1       transfer acute sexual assault survivors to the  
2       geographically closest treatment hospital or treatment  
3       hospital with approved pediatric transfer that has the  
4       capacity to provide ease of transfer to and accept acute  
5       sexual assault survivors from the proposed transfer  
6       hospital and is willing to provide them medical forensic  
7       examinations;

8           (2) the existence of an areawide treatment plan to  
9       provide medical forensic examinations to acute sexual  
10       assault survivors in the region;

11           (3) the average daily, monthly, and annual number of  
12       sexual assault survivors who presented and received  
13       medical forensic examinations;

14           (4) the number of qualified medical providers employed  
15       at the hospital;

16           (5) the existence of other agreements between transfer  
17       hospitals and other acute care hospitals related to  
18       patient referral and transfer, communication, patient  
19       medical records, and emergency and non-emergency patient  
20       transportation;

21           (6) the number of transfer hospitals with which a  
22       treatment hospital has a transfer agreement and its  
23       capacity to enter into additional transfer agreements, for  
24       which special consideration shall be given to treatment  
25       hospitals currently providing medical forensic  
26       examinations to acute sexual assault survivors; and

1           (7) the provisions in the plan for initial  
2           transportation to the treatment hospital or treatment  
3           hospital with approved pediatric transfer, as well as  
4           appropriate return transportation, which should include  
5           hospital-facilitated and survivor-facilitated options to  
6           attempt to minimize survivor wait times while also taking  
7           into consideration extenuating factors outside the  
8           hospital's control, including which facility is  
9           responsible for arranging transportation, transportation  
10           options, and hospital-specific factors influencing  
11           survivor wait time, including, but not limited to,  
12           discharge planning and arranging hospital-facilitated  
13           transportation in a manner that minimizes the amount of  
14           time a survivor waits for transportation under the  
15           proposed plan.

16           In approving or denying the proposed sexual assault  
17           transfer plan, the Department may also consider other factors,  
18           including, but not limited to, hospital capacity, emergency  
19           department patient volume, communication, and transportation  
20           capacity.

21           Hospitals located in counties with a population of less  
22           than 1,000,000 and within a 20-mile radius of a 4-year public  
23           university shall submit an areawide sexual assault treatment  
24           plan that is approved by the Department. The approved areawide  
25           plan shall include at least one treatment hospital or  
26           treatment hospital with approved pediatric transfer within the

1 20-mile radius of the 4-year public university.

2 ~~In counties with a population of less than 1,000,000, the~~  
3 ~~Department may not approve a sexual assault transfer plan for~~  
4 ~~a hospital located within a 20-mile radius of a 4-year public~~  
5 ~~university, not including community colleges, unless there is~~  
6 ~~a treatment hospital with a sexual assault treatment plan~~  
7 ~~approved by the Department within a 20-mile radius of the~~  
8 ~~4-year public university.~~

9 A transfer must be in accordance with federal and State  
10 laws and local ordinances.

11 A treatment hospital with approved pediatric transfer must  
12 submit an areawide treatment plan under Section 3 of this Act  
13 that includes a written agreement with a treatment hospital  
14 stating that the treatment hospital will provide medical  
15 forensic examinations ~~services~~ to pediatric sexual assault  
16 survivors transferred from the treatment hospital with  
17 approved pediatric transfer. The areawide treatment plan may  
18 also include an approved pediatric health care facility.

19 A transfer hospital must submit an areawide treatment plan  
20 under Section 3 of this Act that includes a written agreement  
21 with a treatment hospital stating that the treatment hospital  
22 will provide medical forensic examinations ~~services~~ to all  
23 sexual assault survivors transferred from the transfer  
24 hospital. The areawide treatment plan may also include an  
25 approved pediatric health care facility. Notwithstanding  
26 anything to the contrary in this paragraph, the areawide

1 treatment plan may include a written agreement with a  
2 treatment hospital with approved pediatric transfer that is  
3 geographically closer than other hospitals providing medical  
4 forensic examinations ~~services~~ to sexual assault survivors 13  
5 years of age or older stating that the treatment hospital with  
6 approved pediatric transfer will provide medical forensic  
7 examinations ~~services~~ to sexual assault survivors 13 years of  
8 age or older who are transferred from the transfer hospital.  
9 If the areawide treatment plan includes a written agreement  
10 with a treatment hospital with approved pediatric transfer, it  
11 must also include a written agreement with a treatment  
12 hospital stating that the treatment hospital will provide  
13 medical forensic examinations ~~services~~ to sexual assault  
14 survivors under 13 years of age who are transferred from the  
15 transfer hospital.

16 Beginning January 1, 2019, each treatment hospital and  
17 treatment hospital with approved pediatric transfer shall  
18 ensure that emergency department attending physicians,  
19 physician assistants, advanced practice registered nurses, and  
20 registered professional nurses providing clinical services,  
21 who do not meet the definition of a qualified medical provider  
22 in Section 1a of this Act, receive a minimum of 2 hours of  
23 sexual assault training by July 1, 2020 or until the treatment  
24 hospital or treatment hospital with approved pediatric  
25 transfer certifies to the Department, in a form and manner  
26 prescribed by the Department, that it employs or contracts

1 with a qualified medical provider in accordance with  
2 subsection (a-7) of Section 5, whichever occurs first.

3 After July 1, 2020 or once a treatment hospital or a  
4 treatment hospital with approved pediatric transfer certifies  
5 compliance with subsection (a-7) of Section 5, whichever  
6 occurs first, each treatment hospital and treatment hospital  
7 with approved pediatric transfer shall ensure that emergency  
8 department attending physicians, physician assistants,  
9 advanced practice registered nurses, and registered  
10 professional nurses providing clinical services, who do not  
11 meet the definition of a qualified medical provider in Section  
12 1a of this Act, receive a minimum of 2 hours of continuing  
13 education on responding to acute sexual assault survivors  
14 every 2 years. Protocols for training shall be included in the  
15 hospital's sexual assault treatment plan.

16 Sexual assault training provided under this subsection may  
17 be provided in person or online and shall include, but not be  
18 limited to:

19 (1) information provided on the provision of a medical  
20 forensic examination ~~services~~;

21 (2) information on the use of the Illinois State  
22 Police Sexual Assault Evidence Collection Kit;

23 (3) information on sexual assault epidemiology,  
24 neurobiology of trauma, drug-facilitated sexual assault,  
25 child sexual abuse, and Illinois sexual assault-related  
26 laws; and

1           (4) information on the hospital's sexual  
2 assault-related policies and procedures.

3           The online training made available by the Office of the  
4 Attorney General under subsection (b) of Section 10 may be  
5 used to comply with this subsection.

6           (a-5) A hospital must submit a plan to provide either (i)  
7 transfer services to all acute sexual assault survivors, (ii)  
8 medical forensic examinations ~~services~~ to all acute sexual  
9 assault survivors, or (iii) transfer services to pediatric  
10 acute sexual assault survivors and medical forensic  
11 examinations ~~services~~ to sexual assault survivors 13 years old  
12 or older as required in subsection (a) of this Section within  
13 60 days of the Department's request. Failure to submit a plan  
14 as described in this subsection shall subject a hospital to  
15 the imposition of a fine by the Department. The Department may  
16 impose a fine of up to \$500 per day until the hospital submits  
17 a plan as described in this subsection.

18           (a-10) Upon receipt of a plan as described in subsection  
19 (a-5), the Department shall notify the hospital whether or not  
20 the plan is acceptable. If the Department determines that the  
21 plan is unacceptable, the hospital must submit a modified plan  
22 within 10 days of service of the notification. If the  
23 Department determines that the modified plan is unacceptable,  
24 or if the hospital fails to submit a modified plan within 10  
25 days, the Department may impose a fine of up to \$500 per day  
26 until an acceptable plan has been submitted, as determined by

1 the Department.

2 (b) An approved pediatric health care facility may provide  
3 medical forensic examinations ~~services~~, in accordance with  
4 rules adopted by the Department, to acute ~~all~~ sexual assault  
5 survivors under the age of 18 who present for medical forensic  
6 examinations ~~services~~ in relation to injuries or trauma  
7 resulting from a sexual assault. These services shall be  
8 provided by a qualified medical provider.

9 A pediatric health care facility must participate in or  
10 submit an areawide treatment plan under Section 3 of this Act  
11 that includes a treatment hospital. If a pediatric health care  
12 facility does not provide certain medical or surgical services  
13 that are provided by hospitals, the areawide sexual assault  
14 treatment plan must include a procedure for ensuring a sexual  
15 assault survivor in need of such medical or surgical services  
16 receives the services at the treatment hospital. The areawide  
17 treatment plan may also include a treatment hospital with  
18 approved pediatric transfer.

19 The Department shall review a proposed sexual assault  
20 treatment plan submitted by a pediatric health care facility  
21 within 60 days after receipt of the plan. If the Department  
22 finds that the proposed plan meets the minimum requirements  
23 set forth in Section 5 of this Act and that implementation of  
24 the proposed plan would provide medical forensic examinations  
25 ~~services~~ for acute sexual assault survivors under the age of  
26 18, then the Department shall approve the plan. If the

1 Department does not approve a plan, then the Department shall  
2 notify the pediatric health care facility that the proposed  
3 plan has not been approved. The pediatric health care facility  
4 shall have 30 days to submit a revised plan. The Department  
5 shall review the revised plan within 30 days after receipt of  
6 the plan and notify the pediatric health care facility whether  
7 the revised plan is approved or rejected. A pediatric health  
8 care facility may not provide medical forensic examinations  
9 ~~services~~ to sexual assault survivors under the age of 18 who  
10 present with a complaint of acute sexual assault ~~within a~~  
11 ~~minimum of the last 7 days or who have disclosed past sexual~~  
12 ~~assault by a specific individual and were in the care of that~~  
13 ~~individual within a minimum of the last 7 days~~ until the  
14 Department has approved a treatment plan.

15 If an approved pediatric health care facility is not open  
16 24 hours a day, 7 days a week, it shall post signage at each  
17 public entrance to its facility that:

18 (1) is at least 14 inches by 14 inches in size;

19 (2) directs those seeking services as follows: "If  
20 closed, call 911 for services or go to the closest  
21 hospital emergency department, (insert name) located at  
22 (insert address).";

23 (3) lists the approved pediatric health care  
24 facility's hours of operation;

25 (4) lists the street address of the building;

26 (5) has a black background with white bold capital

1 lettering in a clear and easy to read font that is at least  
2 72-point type, and with "call 911" in at least 125-point  
3 type;

4 (6) is posted clearly and conspicuously on or adjacent  
5 to the door at each entrance and, if building materials  
6 allow, is posted internally for viewing through glass; if  
7 posted externally, the sign shall be made of  
8 weather-resistant and theft-resistant materials,  
9 non-removable, and adhered permanently to the building;  
10 and

11 (7) has lighting that is part of the sign itself or is  
12 lit with a dedicated light that fully illuminates the  
13 sign.

14 A copy of the proposed sign must be submitted to the  
15 Department and approved as part of the approved pediatric  
16 health care facility's sexual assault treatment plan.

17 (c) Each treatment hospital, treatment hospital with  
18 approved pediatric transfer, and approved pediatric health  
19 care facility must enter into a memorandum of understanding  
20 with a rape crisis center for medical advocacy services, if  
21 these services are available to the treatment hospital,  
22 treatment hospital with approved pediatric transfer, or  
23 approved pediatric health care facility. With the consent of  
24 the sexual assault survivor, a rape crisis counselor shall  
25 remain in the exam room during the collection for forensic  
26 evidence.

1 (d) Every ~~treatment hospital, treatment hospital with~~  
2 ~~approved pediatric transfer,~~ and approved pediatric health  
3 care facility's sexual assault treatment plan or sexual  
4 assault transfer plan shall include procedures for complying  
5 with mandatory reporting requirements pursuant to (1) the  
6 Abused and Neglected Child Reporting Act; (2) the Abused and  
7 Neglected Long Term Care Facility Residents Reporting Act; (3)  
8 the Adult Protective Services Act; and (iv) the Criminal  
9 Identification Act.

10 (e) Each treatment hospital, treatment hospital with  
11 approved pediatric transfer, and approved pediatric health  
12 care facility shall submit to the Department every 6 months,  
13 in a manner prescribed by the Department, the following  
14 information:

15 (1) The total number of patients who presented with a  
16 complaint of sexual assault.

17 (2) The total number of Illinois State Police Sexual  
18 Assault Evidence Collection Kits:

19 (A) offered to (i) all acute sexual assault  
20 survivors and (ii) pediatric acute sexual assault  
21 survivors pursuant to paragraph (1.5) of subsection  
22 (a-5) of Section 5;

23 (B) completed for (i) all acute sexual assault  
24 survivors and (ii) pediatric acute sexual assault  
25 survivors; and

26 (C) declined by (i) all acute sexual assault

1 survivors and (ii) pediatric acute sexual assault  
2 survivors.

3 This information shall be made available on the  
4 Department's website.

5 (f) This Section is effective on and after January 1, 2026  
6 ~~2024~~.

7 (Source: P.A. 101-73, eff. 7-12-19; 101-634, eff. 6-5-20;  
8 102-22, eff. 6-25-21; 102-674, eff. 11-30-21; 102-1106, eff.  
9 1-1-23.)

10 (410 ILCS 70/2.05)

11 Sec. 2.05. Department requirements.

12 (a) The Department shall periodically conduct on-site  
13 reviews of approved sexual assault treatment plans with  
14 hospital and approved pediatric health care facility personnel  
15 to ensure that the established procedures are being followed.  
16 Department personnel conducting the on-site reviews shall  
17 attend 4 hours of sexual assault training conducted by a  
18 qualified medical provider that includes, but is not limited  
19 to, forensic evidence collection provided to acute sexual  
20 assault survivors of any age and Illinois sexual  
21 assault-related laws and administrative rules.

22 (b) On July 1, 2026 ~~2019~~ and each July 1 thereafter, the  
23 Department shall submit a report to the General Assembly  
24 containing information on the hospitals and pediatric health  
25 care facilities in this State that have submitted a plan to

1 provide: (i) transfer services to all acute sexual assault  
2 survivors, (ii) medical forensic examinations ~~services~~ to all  
3 acute sexual assault survivors, (iii) transfer services to  
4 pediatric acute sexual assault survivors and medical forensic  
5 examinations ~~services~~ to acute sexual assault survivors 13  
6 years old or older, or (iv) medical forensic examinations  
7 ~~services~~ to pediatric acute sexual assault survivors. The  
8 Department shall post the report on its Internet website on or  
9 before October 1, 2026 ~~2019~~ and, except as otherwise provided  
10 in this Section, update the report every quarter thereafter.  
11 The report shall include all of the following:

12 (1) Each hospital and pediatric care facility that has  
13 submitted a plan, including the submission date of the  
14 plan, type of plan submitted, and the date the plan was  
15 approved or denied. If a pediatric health care facility  
16 withdraws its plan, the Department shall immediately  
17 update the report on its Internet website to remove the  
18 pediatric health care facility's name and information.

19 (2) Each hospital that has failed to submit a plan as  
20 required in subsection (a) of Section 2.

21 (3) Each hospital and approved pediatric care facility  
22 that has to submit an acceptable Plan of Correction within  
23 the time required by Section 2.1, including the date the  
24 Plan of Correction was required to be submitted. Once a  
25 hospital or approved pediatric health care facility  
26 submits and implements the required Plan of Correction,

1 the Department shall immediately update the report on its  
2 Internet website to reflect that hospital or approved  
3 pediatric health care facility's compliance.

4 (4) Each hospital and approved pediatric care facility  
5 at which the periodic on-site review required by Section  
6 2.05 of this Act has been conducted, including the date of  
7 the on-site review and whether the hospital or approved  
8 pediatric care facility was found to be in compliance with  
9 its approved plan.

10 (5) Each areawide treatment plan submitted to the  
11 Department pursuant to Section 3 of this Act, including  
12 which treatment hospitals, treatment hospitals with  
13 approved pediatric transfer, transfer hospitals and  
14 approved pediatric health care facilities are identified  
15 in each areawide treatment plan.

16 (c) The Department, in consultation with the Office of the  
17 Attorney General, shall adopt administrative rules by January  
18 1, 2020 establishing a process for physicians and physician  
19 assistants to provide documentation of training and clinical  
20 experience that meets or is substantially similar to the  
21 Sexual Assault Nurse Examiner Education Guidelines established  
22 by the International Association of Forensic Nurses in order  
23 to qualify as a sexual assault forensic examiner.

24 (d) This Section is effective on and after January 1, 2026  
25 2024.

26 (Source: P.A. 101-634, eff. 6-5-20; 102-22, eff. 6-25-21;

1 102-674, eff. 11-30-21.)

2 (410 ILCS 70/2.2)

3 Sec. 2.2. Emergency contraception.

4 (a) The General Assembly finds:

5 (1) Crimes of sexual assault and sexual abuse cause  
6 significant physical, emotional, and psychological trauma  
7 to the victims. This trauma is compounded by a victim's  
8 fear of becoming pregnant and bearing a child as a result  
9 of the sexual assault.

10 (2) Each year over 32,000 women become pregnant in the  
11 United States as the result of rape and approximately 50%  
12 of these pregnancies end in abortion.

13 (3) As approved for use by the Federal Food and Drug  
14 Administration (FDA), emergency contraception can  
15 significantly reduce the risk of pregnancy if taken within  
16 72 hours after the sexual assault.

17 (4) By providing emergency contraception to rape  
18 victims in a timely manner, the trauma of rape can be  
19 significantly reduced.

20 (b) Every hospital or approved pediatric health care  
21 facility providing services to sexual assault survivors in  
22 accordance with a plan approved under Section 2 must develop a  
23 protocol that ensures that each survivor of acute sexual  
24 assault will receive medically and factually accurate and  
25 written and oral information about emergency contraception;

1 the indications and contraindications and risks associated  
2 with the use of emergency contraception; and a description of  
3 how and when victims may be provided emergency contraception  
4 at no cost upon the written order of a physician licensed to  
5 practice medicine in all its branches, a licensed advanced  
6 practice registered nurse, or a licensed physician assistant.  
7 The Department shall approve the protocol if it finds that the  
8 implementation of the protocol would provide sufficient  
9 protection for survivors of acute sexual assault.

10 The hospital or approved pediatric health care facility  
11 shall implement the protocol upon approval by the Department.  
12 The Department shall adopt rules and regulations establishing  
13 one or more safe harbor protocols and setting minimum  
14 acceptable protocol standards that hospitals may develop and  
15 implement. The Department shall approve any protocol that  
16 meets those standards. The Department may provide a sample  
17 acceptable protocol upon request.

18 (c) This Section is effective on and after January 1,  
19 2024.

20 (Source: P.A. 101-634, eff. 6-5-20; 102-22, eff. 6-25-21;  
21 102-674, eff. 11-30-21.)

22 (410 ILCS 70/3) (from Ch. 111 1/2, par. 87-3)

23 Sec. 3. Areawide sexual assault treatment plans;  
24 submission.

25 (a) Hospitals and approved pediatric health care

1 facilities in the area to be served may develop and  
2 participate in areawide plans that shall describe the medical  
3 forensic examinations ~~services~~ to sexual assault survivors  
4 that each participating hospital and approved pediatric health  
5 care facility has agreed to make available. Each hospital and  
6 approved pediatric health care facility participating in such  
7 a plan shall provide such services as it is designated to  
8 provide in the plan agreed upon by the participants. An  
9 areawide plan may include treatment hospitals, treatment  
10 hospitals with approved pediatric transfer, transfer  
11 hospitals, approved pediatric health care facilities, or  
12 out-of-state hospitals as provided in Section 5.4. All  
13 areawide plans shall be submitted to the Department for  
14 approval, prior to becoming effective. The Department shall  
15 approve a proposed plan if it finds that the minimum  
16 requirements set forth in Section 5 and implementation of the  
17 plan would provide for appropriate medical forensic  
18 examinations ~~services~~ for the people of the area to be served.

19 (b) This Section is effective on and after January 1,  
20 2024.

21 (Source: P.A. 101-634, eff. 6-5-20; 102-22, eff. 6-25-21;  
22 102-674, eff. 11-30-21.)

23 (410 ILCS 70/5) (from Ch. 111 1/2, par. 87-5)

24 Sec. 5. Minimum requirements for medical forensic  
25 examinations ~~services~~ provided to sexual assault survivors by

1 hospitals and approved pediatric health care facilities.

2 (a) Every hospital and approved pediatric health care  
3 facility providing medical forensic examinations ~~services~~ to  
4 acute sexual assault survivors under this Act shall, as  
5 minimum requirements for such services, provide, ~~with the~~  
6 ~~consent of the sexual assault survivor, and as ordered by the~~  
7 ~~attending physician, an advanced practice registered nurse, or~~  
8 ~~a physician assistant,~~ the services set forth in subsection  
9 (a-5).

10 A qualified medical provider must provide the services set  
11 forth in subsection (a-5) as ordered by the attending  
12 physician, an advanced practice registered nurse, or a  
13 physician assistant.

14 (a-5) A treatment hospital, a treatment hospital with  
15 approved pediatric transfer, or an approved pediatric health  
16 care facility shall provide the following services in  
17 accordance with subsections ~~subsection~~ (a) and (b):

18 (1) Appropriate medical forensic examinations ~~services~~  
19 without delay, in a private, age-appropriate or  
20 developmentally-appropriate space, required to ensure the  
21 health, safety, and welfare of a sexual assault survivor  
22 and which may be used as evidence in a criminal proceeding  
23 against a person accused of the sexual assault, in a  
24 proceeding under the Juvenile Court Act of 1987, or in an  
25 investigation under the Abused and Neglected Child  
26 Reporting Act.

1           Records of medical forensic examinations ~~services~~,  
2           including results of examinations and tests, the Illinois  
3           State Police Medical Forensic Documentation Forms, the  
4           Illinois State Police Patient Discharge Materials, and the  
5           Illinois State Police Patient Consent: Collect and Test  
6           Evidence or Collect and Hold Evidence Form, shall be  
7           maintained by the hospital or approved pediatric health  
8           care facility as part of the patient's electronic medical  
9           record.

10           Records of medical forensic examinations ~~services~~ of  
11           sexual assault survivors under the age of 18 shall be  
12           retained by the hospital for a period of 60 years after the  
13           sexual assault survivor reaches the age of 18. Records of  
14           medical forensic examinations ~~services~~ of sexual assault  
15           survivors 18 years of age or older shall be retained by the  
16           hospital for a period of 20 years after the date the record  
17           was created.

18           Records of medical forensic examinations ~~services~~ may  
19           only be disseminated in accordance with Section 6.5 of  
20           this Act and other State and federal law.

21           (1.5) An offer to complete the Illinois State Police  
22           Sexual Assault Evidence Collection Kit for any acute  
23           sexual assault survivor. If the offer to complete the  
24           Illinois State Police Sexual Assault Evidence Collection  
25           Kit is accepted by the survivor, then evidence collection  
26           shall be completed based on the qualified medical

1 provider's clinical discretion, best practices for  
2 evidence collection, and information provided by the  
3 sexual assault survivor. A patient may decline any portion  
4 of the Illinois State Police Sexual Assault Evidence Kit,  
5 but if any evidence is collected, then that shall  
6 constitute evidence collection being completed for the  
7 purposes of this Section and subsection (e) of Section 2.  
8 Nothing in this Section is intended to prohibit a  
9 qualified medical provider from offering, on the  
10 provider's own accord or in response to a survivor  
11 request, an Illinois State Police Sexual Assault Evidence  
12 Collection Kit to a sexual assault survivor who presents  
13 at a treatment hospital, treatment hospital with approved  
14 pediatric transfer, or approved pediatric health care  
15 facility with a nonacute complaint of sexual assault  
16 according to the qualified medical provider's clinical  
17 discretion based on best practices for indications for  
18 evidence collection ~~who presents within a minimum of the~~  
19 ~~last 7 days of the assault or who has disclosed past sexual~~  
20 ~~assault by a specific individual and was in the care of~~  
21 ~~that individual within a minimum of the last 7 days.~~

22 (A) Appropriate oral and written information  
23 concerning evidence-based guidelines for the  
24 appropriateness of evidence collection depending on  
25 the sexual development of the sexual assault survivor,  
26 the type of sexual assault, and the timing of the

1 sexual assault shall be provided to the sexual assault  
2 survivor. ~~Evidence collection is encouraged for~~  
3 ~~prepubescent sexual assault survivors who present to a~~  
4 ~~hospital or approved pediatric health care facility~~  
5 ~~with a complaint of sexual assault within a minimum of~~  
6 ~~96 hours after the sexual assault.~~

7 The information required under this subparagraph  
8 shall be provided ~~in person by the qualified medical~~  
9 ~~provider providing medical forensic services directly~~  
10 to the sexual assault survivor by a qualified medical  
11 provider either in person or via a virtual or  
12 telephone consultation.

13 The written information provided shall be the  
14 information created in accordance with Section 10 of  
15 this Act.

16 (B) ~~Following the discussion regarding the~~  
17 ~~evidence based guidelines for evidence collection in~~  
18 ~~accordance with subparagraph (A), evidence collection~~  
19 ~~must be completed at the sexual assault survivor's~~  
20 ~~request.~~ A sexual assault nurse examiner conducting an  
21 examination using the Illinois State Police Sexual  
22 Assault Evidence Collection Kit may do so without the  
23 presence or participation of a physician.

24 (2) Appropriate oral and written information  
25 concerning the possibility of infection, sexually  
26 transmitted infection, including an evaluation of the

1 sexual assault survivor's risk of contracting human  
2 immunodeficiency virus (HIV) from sexual assault, and  
3 pregnancy resulting from sexual assault.

4 (3) Appropriate oral and written information  
5 concerning accepted medical procedures, laboratory tests,  
6 medication, and possible contraindications of such  
7 medication available for the prevention or treatment of  
8 infection or disease resulting from sexual assault.

9 (3.5) After a medical evidentiary or physical  
10 examination, access to a shower at no cost, unless  
11 showering facilities are unavailable.

12 (4) An amount of medication, including HIV  
13 prophylaxis, for treatment at the hospital or approved  
14 pediatric health care facility and after discharge as is  
15 deemed appropriate by the attending physician, an advanced  
16 practice registered nurse, or a physician assistant in  
17 accordance with the Centers for Disease Control and  
18 Prevention guidelines and consistent with the hospital's  
19 or approved pediatric health care facility's current  
20 approved protocol for sexual assault survivors.

21 (5) Photo documentation of the sexual assault  
22 survivor's injuries, anatomy involved in the assault, or  
23 other visible evidence on the sexual assault survivor's  
24 body to supplement the medical forensic history and  
25 written documentation of physical findings and evidence  
26 beginning July 1, 2019. Photo documentation does not

1           replace written documentation of the injury.

2           (6) Written and oral instructions indicating the need  
3           for follow-up examinations and laboratory tests after the  
4           sexual assault to determine the presence or absence of  
5           sexually transmitted infection.

6           (7) Referral by hospital or approved pediatric health  
7           care facility personnel for appropriate counseling.

8           (8) Medical advocacy services provided by a rape  
9           crisis counselor whose communications are protected under  
10          Section 8-802.1 of the Code of Civil Procedure, if there  
11          is a memorandum of understanding between the hospital or  
12          approved pediatric health care facility and a rape crisis  
13          center. With the consent of the sexual assault survivor, a  
14          rape crisis counselor shall remain in the exam room during  
15          the medical forensic examination.

16          (9) Written information regarding services provided by  
17          a Children's Advocacy Center and rape crisis center, if  
18          applicable.

19          (10) A treatment hospital, a treatment hospital with  
20          approved pediatric transfer, an out-of-state hospital as  
21          defined in Section 5.4, or an approved pediatric health  
22          care facility shall comply with the rules relating to the  
23          collection and tracking of sexual assault evidence adopted  
24          by the Illinois State Police under Section 50 of the  
25          Sexual Assault Evidence Submission Act.

26          (11) Written information regarding the Illinois State

1 Police sexual assault evidence tracking system.

2 (a-7) Every hospital with a treatment plan approved by the  
3 Department and every approved pediatric health care facility  
4 shall employ or contract with a qualified medical provider to  
5 initiate a medical forensic examination ~~services~~ to a sexual  
6 assault survivor within 90 minutes of a concern arising at the  
7 hospital or facility of acute sexual assault ~~the patient~~  
8 ~~presenting to the treatment hospital or treatment hospital~~  
9 ~~with approved pediatric transfer~~. The provision of a medical  
10 forensic examination ~~services~~ by a qualified medical provider  
11 shall not delay the provision of life-saving medical care.

12 (b) Before a medical forensic examination is provided,  
13 consent must be obtained in accordance with this Section.  
14 Evidence collection shall not be completed without first  
15 obtaining consent.

16 (1) Any person able to consent who is a sexual assault  
17 survivor who seeks a medical forensic examination ~~services~~  
18 or follow-up healthcare under this Act shall be provided  
19 such services without the consent of any parent, guardian,  
20 custodian, surrogate, or agent.

21 (2) If a minor sexual assault survivor under the age  
22 of 18 is unable to consent to a medical forensic  
23 examination ~~services~~, the examination ~~services~~ may be  
24 provided with the consent of the survivor's parent,  
25 guardian, or health care power of attorney and with the  
26 assent of the sexual assault survivor ~~under the Consent by~~

1 ~~Minors to Health Care Services Act, the Health Care~~  
2 ~~Surrogate Act, or other applicable State and federal laws.~~

3 (3) If an adult sexual assault survivor is unable to  
4 consent to a medical forensic examination, the examination  
5 may be provided with the consent of the survivor's  
6 guardian or health care power of attorney and with the  
7 assent of the sexual assault survivor.

8 (b-5) Every hospital or approved pediatric health care  
9 facility providing medical forensic examinations ~~services~~ to  
10 acute sexual assault survivors shall issue a voucher to any  
11 sexual assault survivor who is eligible to receive one in  
12 accordance with Section 5.2 of this Act. The hospital or  
13 approved pediatric health care facility shall make a copy of  
14 the voucher and place it in the medical record of the sexual  
15 assault survivor. The hospital or approved pediatric health  
16 care facility shall provide a copy of the voucher to the sexual  
17 assault survivor after discharge upon request.

18 (c) Nothing in this Section creates a physician-patient  
19 relationship that extends beyond discharge from the hospital  
20 or approved pediatric health care facility.

21 (d) This Section is effective on and after January 1,  
22 2024.

23 (Source: P.A. 101-81, eff. 7-12-19; 101-377, eff. 8-16-19;  
24 101-634, eff. 6-5-20; 102-22, eff. 6-25-21; 102-538, eff.  
25 8-20-21; 102-674, eff. 11-30-21; 102-813, eff. 5-13-22;  
26 102-1106, eff. 1-1-23.)

1 (410 ILCS 70/5.1)

2 Sec. 5.1. Storage, retention, and dissemination of photo  
3 documentation relating to medical forensic examinations  
4 ~~services~~.

5 (a) Photo documentation taken during a medical forensic  
6 examination shall be maintained by the hospital or approved  
7 pediatric health care facility as part of the patient's  
8 medical record.

9 Photo documentation shall be stored and backed up securely  
10 in its original file format in accordance with facility  
11 protocol. The facility protocol shall require limited access  
12 to the images and be included in the sexual assault treatment  
13 plan submitted to the Department.

14 Photo documentation of a sexual assault survivor under the  
15 age of 18 shall be retained for a period of 60 years after the  
16 sexual assault survivor reaches the age of 18. Photo  
17 documentation of a sexual assault survivor 18 years of age or  
18 older shall be retained for a period of 20 years after the  
19 record was created.

20 Photo documentation of the sexual assault survivor's  
21 injuries, anatomy involved in the assault, or other visible  
22 evidence on the sexual assault survivor's body may be used for  
23 peer review, expert second opinion, or in a criminal  
24 proceeding against a person accused of sexual assault, a  
25 proceeding under the Juvenile Court Act of 1987, or in an

1 investigation under the Abused and Neglected Child Reporting  
2 Act. Any dissemination of photo documentation, including for  
3 peer review, an expert second opinion, or in any court or  
4 administrative proceeding or investigation, must be in  
5 accordance with State and federal law.

6 (b) This Section is effective on and after January 1,  
7 2024.

8 (Source: P.A. 101-634, eff. 6-5-20; 102-22, eff. 6-25-21;  
9 102-674, eff. 11-30-21.)

10 (410 ILCS 70/5.2)

11 Sec. 5.2. Sexual assault services voucher.

12 (a) A sexual assault services voucher shall be issued by  
13 ~~the a treatment hospital, treatment hospital with approved~~  
14 ~~pediatric transfer,~~ or approved pediatric health care facility  
15 where at the time a sexual assault survivor first presents  
16 seeking a receives medical forensic examination or medical  
17 care and treatment services.

18 (b) Each ~~treatment hospital, treatment hospital with~~  
19 ~~approved pediatric transfer,~~ and approved pediatric health  
20 care facility must include in its sexual assault treatment  
21 plan or sexual assault transfer plan submitted to the  
22 Department in accordance with Section 2 of this Act a protocol  
23 for issuing sexual assault services vouchers. The protocol  
24 shall, at a minimum, include the following:

25 (1) Identification of employee positions responsible

1 for issuing sexual assault services vouchers.

2 (2) Identification of employee positions with access  
3 to the Medical Electronic Data Interchange or successor  
4 system.

5 (3) A statement to be signed by each employee of an  
6 approved pediatric health care facility with access to the  
7 Medical Electronic Data Interchange or successor system  
8 affirming that the Medical Electronic Data Interchange or  
9 successor system will only be used for the purpose of  
10 issuing sexual assault services vouchers.

11 Every transfer hospital providing medical care and  
12 treatment to sexual assault survivors shall issue a voucher to  
13 any sexual assault survivor who is eligible to receive one.  
14 The transfer hospital shall make a copy of the voucher and  
15 place it in the medical record of the sexual assault survivor.  
16 The hospital shall provide a copy of the voucher to the sexual  
17 assault survivor prior to transfer, or after discharge upon  
18 request.

19 (c) A sexual assault services voucher may be used to seek  
20 payment for any ambulance services, medical forensic  
21 examination, medical care and treatment as defined by 77 Ill.  
22 Adm. Code Part 545 ~~services~~, laboratory services, pharmacy  
23 services, and follow-up healthcare provided as a result of the  
24 sexual assault.

25 (d) Any treatment hospital, treatment hospital with  
26 approved pediatric transfer, approved pediatric health care

1 facility, health care professional, ambulance provider,  
2 laboratory, or pharmacy may submit a bill for services  
3 provided to a sexual assault survivor as a result of a sexual  
4 assault to the Department of Healthcare and Family Services  
5 Sexual Assault Emergency Treatment Program. The bill shall  
6 include:

7 (1) the name and date of birth of the sexual assault  
8 survivor;

9 (2) the service provided;

10 (3) the charge of service;

11 (4) the date the service was provided; and

12 (5) the recipient identification number, if known.

13 A health care professional, ambulance provider,  
14 laboratory, or pharmacy is not required to submit a copy of the  
15 sexual assault services voucher.

16 The Department of Healthcare and Family Services Sexual  
17 Assault Emergency Treatment Program shall electronically  
18 verify, using the Medical Electronic Data Interchange or a  
19 successor system, that a sexual assault services voucher was  
20 issued to a sexual assault survivor prior to issuing payment  
21 for the services.

22 If a sexual assault services voucher was not issued to a  
23 sexual assault survivor by the ~~treatment hospital, treatment~~  
24 ~~hospital with approved pediatric transfer,~~ or approved  
25 pediatric health care facility, then a health care  
26 professional, ambulance provider, laboratory, or pharmacy may

1 submit a request to the Department of Healthcare and Family  
2 Services Sexual Assault Emergency Treatment Program to issue a  
3 sexual assault services voucher.

4 (e) This Section is effective on and after January 1, 2026  
5 ~~2024~~.

6 (Source: P.A. 101-634, eff. 6-5-20; 102-22, eff. 6-25-21;  
7 102-674, eff. 11-30-21.)

8 (410 ILCS 70/5.3)

9 Sec. 5.3. Pediatric sexual assault care.

10 (a) The General Assembly finds:

11 (1) Pediatric sexual assault survivors can suffer from  
12 a wide range of health problems across their life span. In  
13 addition to immediate health issues, such as sexually  
14 transmitted infections, physical injuries, and  
15 psychological trauma, child sexual abuse victims are at  
16 greater risk for a plethora of adverse psychological and  
17 somatic problems into adulthood in contrast to those who  
18 were not sexually abused.

19 (2) Sexual abuse against the pediatric population is  
20 distinct, particularly due to their dependence on their  
21 caregivers and the ability of perpetrators to manipulate  
22 and silence them (especially when the perpetrators are  
23 family members or other adults trusted by, or with power  
24 over, children). Sexual abuse is often hidden by  
25 perpetrators, unwitnessed by others, and may leave no

1 obvious physical signs on child victims.

2 (3) Pediatric sexual assault survivors throughout the  
3 State should have access to qualified medical providers  
4 who have received specialized training regarding the care  
5 of pediatric sexual assault survivors within a reasonable  
6 distance from their home.

7 (4) There is a need in Illinois to increase the number  
8 of qualified medical providers available to provide  
9 medical forensic examinations ~~services~~ to pediatric sexual  
10 assault survivors.

11 (b) If a medically stable pediatric acute sexual assault  
12 survivor presents at a transfer hospital or treatment hospital  
13 with approved pediatric transfer that has a plan approved by  
14 the Department requesting a medical forensic examination  
15 ~~services~~, then the hospital emergency department staff shall  
16 contact an approved pediatric health care facility, if one is  
17 designated in the hospital's plan, then the patient and  
18 non-offending parent or legal guardian shall be given the  
19 option to transfer to the approved pediatric health care  
20 facility during posted hours of operation or a treatment  
21 hospital.

22 ~~If the transferring hospital confirms that medical~~  
23 ~~forensic services can be initiated within 90 minutes of the~~  
24 ~~patient's arrival at the approved pediatric health care~~  
25 ~~facility following an immediate transfer, then the hospital~~  
26 ~~emergency department staff shall notify the patient and~~

1 ~~non-offending parent or legal guardian that the patient will~~  
2 ~~be transferred for medical forensic services and shall provide~~  
3 ~~the patient and non-offending parent or legal guardian the~~  
4 ~~option of being transferred to the approved pediatric health~~  
5 ~~care facility or the treatment hospital designated in the~~  
6 ~~hospital's plan. The pediatric sexual assault survivor may be~~  
7 ~~transported by ambulance, law enforcement, or personal~~  
8 ~~vehicle.~~

9 ~~If medical forensic services cannot be initiated within 90~~  
10 ~~minutes of the patient's arrival at the approved pediatric~~  
11 ~~health care facility, there is no approved pediatric health~~  
12 ~~care facility designated in the hospital's plan, or the~~  
13 ~~patient or non-offending parent or legal guardian chooses to~~  
14 ~~be transferred to a treatment hospital, the hospital emergency~~  
15 ~~department staff shall contact a treatment hospital designated~~  
16 ~~in the hospital's plan to arrange for the transfer of the~~  
17 ~~patient to the treatment hospital for medical forensic~~  
18 ~~services, which are to be initiated within 90 minutes of the~~  
19 ~~patient's arrival at the treatment hospital. The treatment~~  
20 ~~hospital shall provide medical forensic services and may not~~  
21 ~~transfer the patient to another facility. The pediatric sexual~~  
22 ~~assault survivor may be transported by ambulance, law~~  
23 ~~enforcement, or personal vehicle.~~

24 (c) When a qualified medical provider who is qualified to  
25 treat pediatric survivors of sexual assault is available, a  
26 treatment hospital with approved pediatric transfer may offer

1 medical forensic examinations to pediatric acute sexual  
2 assault survivors subject to prior approval from the  
3 Department. Prior to granting approval, the Department shall  
4 (i) confirm the treatment hospital with approved pediatric  
5 transfer is working toward becoming a treatment hospital and  
6 (ii) consult with the treatment hospital that receives acute  
7 pediatric sexual assault survivors from the treatment hospital  
8 with approved pediatric transfer pursuant to the plan approved  
9 by the Department. Department approval under this Section is  
10 valid for one year and may be renewed. ~~If a medically stable~~  
11 ~~pediatric sexual assault survivor presents at a treatment~~  
12 ~~hospital that has a plan approved by the Department requesting~~  
13 ~~medical forensic services, then the hospital emergency~~  
14 ~~department staff shall contact an approved pediatric health~~  
15 ~~care facility, if one is designated in the treatment~~  
16 ~~hospital's areawide treatment plan.~~

17 ~~If medical forensic services can be initiated within 90~~  
18 ~~minutes after the patient's arrival at the approved pediatric~~  
19 ~~health care facility following an immediate transfer, the~~  
20 ~~hospital emergency department staff shall provide the patient~~  
21 ~~and non-offending parent or legal guardian the option of~~  
22 ~~having medical forensic services performed at the treatment~~  
23 ~~hospital or at the approved pediatric health care facility. If~~  
24 ~~the patient or non-offending parent or legal guardian chooses~~  
25 ~~to be transferred, the pediatric sexual assault survivor may~~  
26 ~~be transported by ambulance, law enforcement, or personal~~

1 ~~vehicle.~~

2 ~~If medical forensic services cannot be initiated within 90~~  
3 ~~minutes after the patient's arrival to the approved pediatric~~  
4 ~~health care facility, there is no approved pediatric health~~  
5 ~~care facility designated in the hospital's plan, or the~~  
6 ~~patient or non-offending parent or legal guardian chooses not~~  
7 ~~to be transferred, the hospital shall provide medical forensic~~  
8 ~~services to the patient.~~

9 (d) If the patient or non-offending parent or legal  
10 guardian chooses to be transferred to an approved pediatric  
11 health care facility pursuant to subsection (b) or (c), then  
12 the hospital emergency department staff shall contact the  
13 approved pediatric health care facility to arrange the  
14 transfer. The pediatric sexual assault survivor and  
15 non-offending parent or legal guardian may be transported by  
16 ambulance, law enforcement, or personal vehicle. A medical  
17 forensic examination shall be initiated within 90 minutes of  
18 the acute sexual assault survivor's arrival at the approved  
19 pediatric health care facility following an immediate transfer  
20 during posted hours of operation.

21 (e) ~~(d)~~ If a pediatric acute sexual assault survivor  
22 presents at an approved pediatric health care facility  
23 ~~requesting medical forensic services~~ or the facility is  
24 contacted by law enforcement or the Department of Children and  
25 Family Services requesting a medical forensic examination  
26 ~~services~~ for a pediatric acute sexual assault survivor during

1 posted hours of operation, then the medical forensic  
2 examination services shall be ~~provided at the facility if the~~  
3 ~~medical forensic services can be~~ initiated within 90 minutes  
4 after the patient's arrival at the facility. ~~If medical~~  
5 ~~forensic services cannot be initiated within 90 minutes after~~  
6 ~~the patient's arrival at the facility, then the patient shall~~  
7 ~~be transferred to a treatment hospital designated in the~~  
8 ~~approved pediatric health care facility's plan for medical~~  
9 ~~forensic services. The pediatric sexual assault survivor may~~  
10 ~~be transported by ambulance, law enforcement, or personal~~  
11 ~~vehicle.~~

12 (f) ~~(e)~~ This Section is effective on and after January 1,  
13 2024.

14 (Source: P.A. 101-634, eff. 6-5-20; 102-22, eff. 6-25-21;  
15 102-674, eff. 11-30-21.)

16 (410 ILCS 70/5.4)

17 Sec. 5.4. Out-of-state hospitals.

18 (a) Nothing in this Section shall prohibit the transfer of  
19 a patient in need of medical services from a hospital that has  
20 been designated as a trauma center by the Department in  
21 accordance with Section 3.90 of the Emergency Medical Services  
22 (EMS) Systems Act.

23 (b) A transfer hospital, treatment hospital with approved  
24 pediatric transfer, or approved pediatric health care facility  
25 may transfer a sexual assault survivor to an out-of-state

1 hospital that is located in a county that borders Illinois if  
2 the out-of-state hospital: (1) submits an areawide treatment  
3 plan approved by the Department; and (2) has certified the  
4 following to the Department in a form and manner prescribed by  
5 the Department that the out-of-state hospital will:

6 (i) consent to the jurisdiction of the Department in  
7 accordance with Section 2.06 of this Act;

8 (ii) comply with all requirements of this Act  
9 applicable to treatment hospitals, including, but not  
10 limited to, offering evidence collection to any Illinois  
11 sexual assault survivor who presents with a complaint of  
12 acute sexual assault ~~within a minimum of the last 7 days or~~  
13 ~~who has disclosed past sexual assault by a specific~~  
14 ~~individual and was in the care of that individual within a~~  
15 ~~minimum of the last 7 days~~ and not billing the sexual  
16 assault survivor for the medical forensic examination  
17 ~~services~~ or 180 days of follow-up healthcare;

18 (iii) use an Illinois State Police Sexual Assault  
19 Evidence Collection Kit to collect forensic evidence from  
20 an Illinois acute sexual assault survivor;

21 (iv) ensure its staff cooperates with Illinois law  
22 enforcement agencies and are responsive to subpoenas  
23 issued by Illinois courts; and

24 (v) provide appropriate transportation upon the  
25 completion of a medical forensic examination ~~services~~ back  
26 to the transfer hospital or treatment hospital with

1           pediatric transfer where the sexual assault survivor  
2           initially presented seeking a medical forensic examination  
3           ~~services~~, unless the sexual assault survivor chooses to  
4           arrange his or her own transportation.

5           ~~(c) Subsection (b) of this Section is inoperative on and~~  
6           ~~after January 1, 2029.~~

7           (Source: P.A. 102-1097, eff. 1-1-23; 102-1106, eff. 1-1-23;  
8           103-154, eff. 6-30-23.)

9           (410 ILCS 70/5.5)

10          Sec. 5.5. Minimum reimbursement requirements for follow-up  
11          healthcare.

12          (a) Every hospital, pediatric health care facility, health  
13          care professional, laboratory, or pharmacy that provides  
14          follow-up healthcare to a sexual assault survivor, with the  
15          consent of the sexual assault survivor and as ordered by the  
16          attending physician, an advanced practice registered nurse, or  
17          physician assistant shall be reimbursed for the follow-up  
18          healthcare services provided. Follow-up healthcare services  
19          include, but are not limited to, the following:

20                 (1) a physical examination;

21                 (2) laboratory tests to determine the presence or  
22                 absence of sexually transmitted infection; and

23                 (3) appropriate medications, including HIV  
24                 prophylaxis, in accordance with the Centers for Disease  
25                 Control and Prevention's guidelines.

1 (b) Reimbursable follow-up healthcare is limited to office  
2 visits with a physician, advanced practice registered nurse,  
3 or physician assistant within 180 days after an initial visit  
4 as a result of the sexual assault ~~for hospital medical~~  
5 ~~forensic services.~~

6 (c) Nothing in this Section requires a hospital, pediatric  
7 health care facility, health care professional, laboratory, or  
8 pharmacy to provide follow-up healthcare to a sexual assault  
9 survivor.

10 (d) This Section is effective on and after January 1,  
11 2024.

12 (Source: P.A. 101-634, eff. 6-5-20; 102-22, eff. 6-25-21;  
13 102-674, eff. 11-30-21; 102-1097, eff. 1-1-23.)

14 (410 ILCS 70/6.2) (from Ch. 111 1/2, par. 87-6.2)

15 Sec. 6.2. Assistance and grants.

16 (a) The Department shall assist in the development and  
17 operation of programs which provide medical forensic  
18 examinations ~~services~~ to sexual assault survivors, and, where  
19 necessary, to provide grants to hospitals and approved  
20 pediatric health care facilities for this purpose.

21 (b) This Section is effective on and after January 1,  
22 2024.

23 (Source: P.A. 101-634, eff. 6-5-20; 102-22, eff. 6-25-21;  
24 102-674, eff. 11-30-21.)

1 (410 ILCS 70/6.5)

2 Sec. 6.5. Written consent to the release of sexual assault  
3 evidence for testing.

4 (a) Upon the completion of a medical forensic examination  
5 ~~services~~, the health care professional providing the medical  
6 forensic examination services shall provide the patient the  
7 opportunity to sign a written consent to allow law enforcement  
8 to submit the sexual assault evidence for testing, if  
9 collected. The written consent shall be on a form included in  
10 the sexual assault evidence collection kit and posted on the  
11 Illinois State Police website. The consent form shall include  
12 whether the survivor consents to the release of information  
13 about the sexual assault to law enforcement.

14 (1) A survivor 13 years of age or older may sign the  
15 written consent to release the evidence for testing.

16 (2) If the survivor is a minor who is under 13 years of  
17 age, the written consent to release the sexual assault  
18 evidence for testing may be signed by the parent,  
19 guardian, or agent acting under a health care power of  
20 attorney. If a parent, guardian, or health care power of  
21 attorney is not available or unwilling to release  
22 evidence, then a State's Attorney or the Attorney General  
23 may petition the court to authorize its release for  
24 testing ~~investigating law enforcement officer, or~~  
25 ~~Department of Children and Family Services.~~

26 (3) If the survivor is an adult who has a guardian of

1 the person, a health care surrogate, or an agent acting  
2 under a health care power of attorney, the consent of the  
3 guardian, surrogate, or agent is not required to release  
4 evidence and information concerning the sexual assault or  
5 sexual abuse. If the adult is unable to provide consent  
6 for the release of evidence and information and a  
7 guardian, surrogate, or agent under a health care power of  
8 attorney is unavailable or unwilling to release the  
9 information, then an investigating law enforcement officer  
10 may authorize the release.

11 (4) Any health care professional or health care  
12 institution, including any hospital or approved pediatric  
13 health care facility, who provides evidence or information  
14 to a law enforcement officer under a written consent as  
15 specified in this Section is immune from any civil or  
16 professional liability that might arise from those  
17 actions, with the exception of willful or wanton  
18 misconduct. The immunity provision applies only if all of  
19 the requirements of this Section are met.

20 (b) The hospital or approved pediatric health care  
21 facility shall keep a copy of a signed or unsigned written  
22 consent form in the patient's medical record.

23 (c) If a written consent to allow law enforcement to hold  
24 the sexual assault evidence is signed at the completion of the  
25 medical forensic examination ~~services~~, the hospital or  
26 approved pediatric health care facility shall include the

1 following information in its discharge instructions:

2 (1) the sexual assault evidence will be stored for 10  
3 years from the completion of an Illinois State Police  
4 Sexual Assault Evidence Collection Kit, or 10 years from  
5 the age of 18 years, whichever is longer;

6 (2) a person authorized to consent to the testing of  
7 the sexual assault evidence may sign a written consent to  
8 allow law enforcement to test the sexual assault evidence  
9 at any time during that 10-year period for an adult  
10 victim, or until a minor victim turns 28 years of age by  
11 (A) contacting the law enforcement agency having  
12 jurisdiction, or if unknown, the law enforcement agency  
13 contacted by the hospital or approved pediatric health  
14 care facility under Section 3.2 of the Criminal  
15 Identification Act; or (B) by working with an advocate at  
16 a rape crisis center;

17 (3) the name, address, and phone number of the law  
18 enforcement agency having jurisdiction, or if unknown the  
19 name, address, and phone number of the law enforcement  
20 agency contacted by the hospital or approved pediatric  
21 health care facility under Section 3.2 of the Criminal  
22 Identification Act; and

23 (4) the name and phone number of a local rape crisis  
24 center.

25 (d) This Section is effective on and after January 1,  
26 2024.

1 (Source: P.A. 101-81, eff. 7-12-19; 101-634, eff. 6-5-20;  
2 102-22, eff. 6-25-21; 102-674, eff. 11-30-21.)

3 (410 ILCS 70/6.6)

4 Sec. 6.6. Submission of sexual assault evidence.

5 (a) As soon as practicable, but in no event more than 4  
6 hours after the completion of a medical forensic examination  
7 ~~services~~, the hospital or approved pediatric health care  
8 facility shall make reasonable efforts to determine the law  
9 enforcement agency having jurisdiction where the sexual  
10 assault occurred, if sexual assault evidence was collected.  
11 The hospital or approved pediatric health care facility may  
12 obtain the name of the law enforcement agency with  
13 jurisdiction from the local law enforcement agency.

14 (b) Within 4 hours after the completion of a medical  
15 forensic examination ~~services~~, the hospital or approved  
16 pediatric health care facility shall notify the law  
17 enforcement agency having jurisdiction that the hospital or  
18 approved pediatric health care facility is in possession of  
19 sexual assault evidence and the date and time the collection  
20 of evidence was completed. The hospital or approved pediatric  
21 health care facility shall document the notification in the  
22 patient's medical records and shall include the agency  
23 notified, the date and time of the notification and the name of  
24 the person who received the notification. This notification to  
25 the law enforcement agency having jurisdiction satisfies the

1 hospital's or approved pediatric health care facility's  
2 requirement to contact its local law enforcement agency under  
3 Section 3.2 of the Criminal Identification Act.

4 (c) If the law enforcement agency having jurisdiction has  
5 not taken physical custody of sexual assault evidence within 5  
6 days of the first contact by the hospital or approved  
7 pediatric health care facility, the hospital or approved  
8 pediatric health care facility shall renotify the law  
9 enforcement agency having jurisdiction that the hospital or  
10 approved pediatric health care facility is in possession of  
11 sexual assault evidence and the date the sexual assault  
12 evidence was collected. The hospital or approved pediatric  
13 health care facility shall document the renotification in the  
14 patient's medical records and shall include the agency  
15 notified, the date and time of the notification and the name of  
16 the person who received the notification.

17 (d) If the law enforcement agency having jurisdiction has  
18 not taken physical custody of the sexual assault evidence  
19 within 10 days of the first contact by the hospital or approved  
20 pediatric health care facility and the hospital or approved  
21 pediatric health care facility has provided renotification  
22 under subsection (c) of this Section, the hospital or approved  
23 pediatric health care facility shall contact the State's  
24 Attorney of the county where the law enforcement agency having  
25 jurisdiction is located. The hospital or approved pediatric  
26 health care facility shall inform the State's Attorney that

1 the hospital or approved pediatric health care facility is in  
2 possession of sexual assault evidence, the date the sexual  
3 assault evidence was collected, the law enforcement agency  
4 having jurisdiction, the dates, times and names of persons  
5 notified under subsections (b) and (c) of this Section. The  
6 notification shall be made within 14 days of the collection of  
7 the sexual assault evidence.

8 (e) This Section is effective on and after January 1,  
9 2024.

10 (Source: P.A. 101-634, eff. 6-5-20; 102-22, eff. 6-25-21;  
11 102-674, eff. 11-30-21.)

12 (410 ILCS 70/7)

13 Sec. 7. Reimbursement.

14 (a) A hospital, approved pediatric health care facility,  
15 or health care professional furnishing medical forensic  
16 examinations, medical care and treatment as defined by 77 Ill.  
17 Adm. Code Part 545 services, an ambulance provider furnishing  
18 transportation to a sexual assault survivor, a hospital,  
19 health care professional, or laboratory providing follow-up  
20 healthcare, or a pharmacy dispensing prescribed medications to  
21 any sexual assault survivor shall furnish such services or  
22 medications to that person without charge and shall seek  
23 payment as follows:

24 (1) If a sexual assault survivor is eligible to  
25 receive benefits under the medical assistance program

1 under Article V of the Illinois Public Aid Code, the  
2 ambulance provider, hospital, approved pediatric health  
3 care facility, health care professional, laboratory, or  
4 pharmacy must submit the bill to the Department of  
5 Healthcare and Family Services or the appropriate Medicaid  
6 managed care organization and accept the amount paid as  
7 full payment.

8 (2) If a sexual assault survivor is covered by one or  
9 more policies of health insurance or is a beneficiary  
10 under a public or private health coverage program, the  
11 ambulance provider, hospital, approved pediatric health  
12 care facility, health care professional, laboratory, or  
13 pharmacy shall bill the insurance company or program. With  
14 respect to such insured patients, applicable deductible,  
15 co-pay, co-insurance, denial of claim, or any other  
16 out-of-pocket insurance-related expense may be submitted  
17 to the Illinois Sexual Assault Emergency Treatment Program  
18 of the Department of Healthcare and Family Services in  
19 accordance with 89 Ill. Adm. Code 148.510 for payment at  
20 the Department of Healthcare and Family Services'  
21 allowable rates under the Illinois Public Aid Code. The  
22 ambulance provider, hospital, approved pediatric health  
23 care facility, health care professional, laboratory, or  
24 pharmacy shall accept the amounts paid by the insurance  
25 company or health coverage program and the Illinois Sexual  
26 Assault Treatment Program as full payment.

1           (3) If a sexual assault survivor (i) is neither  
2 eligible to receive benefits under the medical assistance  
3 program under Article V of the Illinois Public Aid Code  
4 nor covered by a policy of insurance or a public or private  
5 health coverage program or (ii) opts out of billing a  
6 private insurance provider, as permitted under subsection  
7 (a-5) of Section 7.5, the ambulance provider, hospital,  
8 approved pediatric health care facility, health care  
9 professional, laboratory, or pharmacy shall submit the  
10 request for reimbursement to the Illinois Sexual Assault  
11 Emergency Treatment Program under the Department of  
12 Healthcare and Family Services in accordance with 89 Ill.  
13 Adm. Code 148.510 at the Department of Healthcare and  
14 Family Services' allowable rates under the Illinois Public  
15 Aid Code.

16           (4) If a sexual assault survivor presents a sexual  
17 assault services voucher for follow-up healthcare, the  
18 healthcare professional, pediatric health care facility,  
19 or laboratory that provides follow-up healthcare or the  
20 pharmacy that dispenses prescribed medications to a sexual  
21 assault survivor shall submit the request for  
22 reimbursement for follow-up healthcare, pediatric health  
23 care facility, laboratory, or pharmacy services to the  
24 Illinois Sexual Assault Emergency Treatment Program under  
25 the Department of Healthcare and Family Services in  
26 accordance with 89 Ill. Adm. Code 148.510 at the

1 Department of Healthcare and Family Services' allowable  
2 rates under the Illinois Public Aid Code. Nothing in this  
3 subsection (a) precludes hospitals or approved pediatric  
4 health care facilities from providing follow-up healthcare  
5 and receiving reimbursement under this Section.

6 (b) Nothing in this Section precludes a hospital, health  
7 care provider, ambulance provider, laboratory, or pharmacy  
8 from billing the sexual assault survivor or any applicable  
9 health insurance or coverage for inpatient services.

10 (b-5) Medical forensic examinations ~~services~~ furnished by  
11 a qualified medical provider ~~person or entity described under~~  
12 ~~subsection (a)~~ to any sexual assault survivor on or after July  
13 1, 2022 that are required under this Act to be reimbursed by  
14 the Department of Healthcare and Family Services, the Illinois  
15 Sexual Assault Emergency Treatment Program under the  
16 Department of Healthcare and Family Services, or the  
17 appropriate Medicaid managed care organization shall be  
18 reimbursed at a rate of ~~at least~~ \$1,000 or at allowable rates  
19 under the Illinois Public Aid Code, whichever is greater.

20 (b-7) Medical care and treatment as defined by 77 Ill.  
21 Adm. Code Part 545 furnished to any sexual assault survivor to  
22 be reimbursed by the Department of Healthcare and Family  
23 Services, the Illinois Sexual Assault Emergency Treatment  
24 Program under the Department of Healthcare and Family  
25 Services, or the appropriate Medicaid managed care  
26 organization shall be reimbursed at allowable rates under the

1 Illinois Public Aid Code.

2 (c) (Blank).

3 (d) (Blank).

4 (e) The Department of Healthcare and Family Services shall  
5 establish standards, rules, and regulations to implement this  
6 Section.

7 (f) This Section is effective on and after January 1,  
8 2024.

9 (Source: P.A. 102-22, eff. 6-25-21; 102-674, eff. 11-30-21;  
10 102-699, Article 30, Section 30-5, eff. 4-19-22; 102-699,  
11 Article 35, Section 35-5 (See Section 99-99 of P.A. 102-699  
12 and Section 99 of P.A. 102-1097 regarding the effective date  
13 of changes made in Article 35 of P.A. 102-699); 103-154, eff.  
14 6-30-23.)

15 (410 ILCS 70/7.5)

16 Sec. 7.5. Prohibition on billing sexual assault survivors  
17 directly for certain services; written notice; billing  
18 protocols.

19 (a) A hospital, approved pediatric health care facility,  
20 health care professional, ambulance provider, laboratory, or  
21 pharmacy furnishing a medical forensic examination services,  
22 medical care and treatment as defined by 77 Ill. Adm. Code Part  
23 545 transportation, follow-up healthcare, or medication to a  
24 sexual assault survivor shall not:

25 (1) charge or submit a bill for any portion of the

1 costs of the services, transportation, or medications to  
2 the sexual assault survivor, including any insurance  
3 deductible, co-pay, co-insurance, denial of claim by an  
4 insurer, spenddown, or any other out-of-pocket expense;

5 (2) communicate with, harass, or intimidate the sexual  
6 assault survivor for payment of services, including, but  
7 not limited to, repeatedly calling or writing to the  
8 sexual assault survivor and threatening to refer the  
9 matter to a debt collection agency or to an attorney for  
10 collection, enforcement, or filing of other process;

11 (3) refer a bill to a collection agency or attorney  
12 for collection action against the sexual assault survivor;

13 (4) contact or distribute information to affect the  
14 sexual assault survivor's credit rating; or

15 (5) take any other action adverse to the sexual  
16 assault survivor or his or her family on account of  
17 providing services to the sexual assault survivor.

18 (a-5) Notwithstanding any other provision of law,  
19 including, but not limited to, subsection (a), a sexual  
20 assault survivor who is not the subscriber or primary  
21 policyholder of the sexual assault survivor's insurance policy  
22 may opt out of billing the sexual assault survivor's private  
23 insurance provider. If the sexual assault survivor opts out of  
24 billing the sexual assault survivor's private insurance  
25 provider, then the bill for the medical forensic examination  
26 ~~services~~ shall be sent to the Department of Healthcare and

1 Family Services' Sexual Assault Emergency Treatment Program  
2 for reimbursement for the services provided to the sexual  
3 assault survivor.

4 (b) Nothing in this Section precludes a hospital, health  
5 care provider, ambulance provider, laboratory, or pharmacy  
6 from billing the sexual assault survivor or any applicable  
7 health insurance or coverage for inpatient services.

8 (c) Every hospital and approved pediatric health care  
9 facility with a sexual assault treatment plan or sexual  
10 assault transfer plan providing treatment services to sexual  
11 assault survivors in accordance with a plan approved by the  
12 Department under Section 2 of this Act shall provide a written  
13 notice to a sexual assault survivor. The written notice must  
14 include, but is not limited to, the following:

15 (1) a statement that the sexual assault survivor  
16 should not be directly billed by any ambulance provider  
17 providing transportation services, or by any hospital,  
18 approved pediatric health care facility, health care  
19 professional, laboratory, or pharmacy for the services the  
20 sexual assault survivor received as an outpatient at the  
21 hospital or approved pediatric health care facility;

22 (2) a statement that a sexual assault survivor who is  
23 admitted to a hospital may be billed for inpatient  
24 services provided by a hospital, health care professional,  
25 laboratory, or pharmacy;

26 (3) a statement that prior to leaving the hospital or

1 approved pediatric health care facility, the hospital or  
2 approved pediatric health care facility will give the  
3 sexual assault survivor a sexual assault services voucher  
4 for follow-up healthcare if the sexual assault survivor is  
5 eligible to receive a sexual assault services voucher;

6 (4) the definition of "follow-up healthcare" as set  
7 forth in Section 1a of this Act;

8 (5) (blank); ~~a phone number the sexual assault~~  
9 ~~survivor may call should the sexual assault survivor~~  
10 ~~receive a bill from the hospital or approved pediatric~~  
11 ~~health care facility for medical forensic services;~~

12 (6) the toll-free phone number of the Office of the  
13 Illinois Attorney General's Health Care Bureau ~~General~~,  
14 which the sexual assault survivor may call should the  
15 sexual assault survivor receive a bill from an ambulance  
16 provider, approved pediatric health care facility, a  
17 health care professional, a laboratory, or a pharmacy.

18 ~~This subsection (c) shall not apply to hospitals that~~  
19 ~~provide transfer services as defined under Section 1a of this~~  
20 ~~Act.~~

21 (d) ~~Within 60 days after the effective date of this~~  
22 ~~amendatory Act of the 99th General Assembly, every health care~~  
23 ~~professional, except for those employed by a hospital or~~  
24 ~~hospital affiliate, as defined in the Hospital Licensing Act,~~  
25 ~~or those employed by a hospital operated under the University~~  
26 ~~of Illinois Hospital Act, who bills separately for medical or~~

1 ~~forensic services must develop a billing protocol that ensures~~  
2 ~~that no survivor of sexual assault will be sent a bill for any~~  
3 ~~medical forensic services and submit the billing protocol to~~  
4 ~~the Office of the Attorney General for approval. Within 60~~  
5 ~~days after the commencement of the provision of medical~~  
6 ~~forensic services, every health care professional, except for~~  
7 ~~those employed by a hospital or hospital affiliate, as defined~~  
8 ~~in the Hospital Licensing Act, or those employed by a hospital~~  
9 ~~operated under the University of Illinois Hospital Act, who~~  
10 ~~bills separately for medical or forensic services must develop~~  
11 ~~a billing protocol that ensures that no survivor of sexual~~  
12 ~~assault is sent a bill for any medical forensic services and~~  
13 ~~submit the billing protocol to the Attorney General for~~  
14 ~~approval. Health care professionals who bill as a legal entity~~  
15 ~~may submit a single billing protocol for the billing entity.~~

16       Within 60 days after the Department's approval of a  
17 treatment plan, a hospital or an approved pediatric health  
18 care facility ~~and any health care professional employed by an~~  
19 ~~approved pediatric health care facility~~ must develop a billing  
20 protocol that ensures that no survivor of sexual assault is  
21 sent a bill for any medical forensic examination ~~services and~~  
22 ~~submit the billing protocol to the Office of the Attorney~~  
23 ~~General for approval.~~

24       The billing protocol must include at a minimum:

25           (1) (blank); ~~a description of training for persons who~~  
26 ~~prepare bills for medical and forensic services;~~

1           (2) (blank); ~~a written acknowledgement signed by a~~  
2 ~~person who has completed the training that the person will~~  
3 ~~not bill survivors of sexual assault;~~

4           (3) prohibitions on submitting any bill for any  
5 portion of the medical forensic examination ~~services~~  
6 provided to a survivor of sexual assault to a collection  
7 agency;

8           (4) (blank); ~~prohibitions on taking any action that~~  
9 ~~would adversely affect the credit of the survivor of~~  
10 ~~sexual assault;~~

11           (5) (blank); ~~the termination of all collection~~  
12 ~~activities if the protocol is violated; and~~

13           (6) the actions to be taken if a bill is sent to a  
14 collection agency or the failure to pay is reported to any  
15 credit reporting agency; and-

16           (7) protocols and procedures for compliance with  
17 subsections (a), (a-5), and (c) of this Section.

18           Upon request, the Department of Healthcare and Family  
19 Services ~~The Office of the Attorney General~~ may provide  
20 assistance to hospitals and approved pediatric health care  
21 facilities developing billing protocols ~~a sample acceptable~~  
22 ~~billing protocol upon request.~~

23           A hospital or approved pediatric health care facility  
24 shall provide a copy of its billing protocol upon request ~~The~~  
25 ~~Office of the Attorney General shall approve a proposed~~  
26 ~~protocol if it finds that the implementation of the protocol~~

1 ~~would result in no survivor of sexual assault being billed or~~  
2 ~~sent a bill for medical forensic services.~~

3 ~~If the Office of the Attorney General determines that~~  
4 ~~implementation of the protocol could result in the billing of~~  
5 ~~a survivor of sexual assault for medical forensic services,~~  
6 ~~the Office of the Attorney General shall provide the health~~  
7 ~~care professional or approved pediatric health care facility~~  
8 ~~with a written statement of the deficiencies in the protocol.~~  
9 ~~The health care professional or approved pediatric health care~~  
10 ~~facility shall have 30 days to submit a revised billing~~  
11 ~~protocol addressing the deficiencies to the Office of the~~  
12 ~~Attorney General. The health care professional or approved~~  
13 ~~pediatric health care facility shall implement the protocol~~  
14 ~~upon approval by the Office of the Attorney General.~~

15 ~~The health care professional or approved pediatric health~~  
16 ~~care facility shall submit any proposed revision to or~~  
17 ~~modification of an approved billing protocol to the Office of~~  
18 ~~the Attorney General for approval. The health care~~  
19 ~~professional or approved pediatric health care facility shall~~  
20 ~~implement the revised or modified billing protocol upon~~  
21 ~~approval by the Office of the Illinois Attorney General.~~

22 (e) This Section is effective on and after January 1,  
23 2024.

24 (Source: P.A. 101-634, eff. 6-5-20; 101-652, eff. 7-1-21;  
25 102-22, eff. 6-25-21; 102-674, eff. 11-30-21; 102-1097, eff.  
26 1-1-23.)

1 (410 ILCS 70/8) (from Ch. 111 1/2, par. 87-8)

2 Sec. 8. Violations and penalties ~~Penalties~~.

3 (a) The Department shall implement a complaint system  
4 through which the Department may receive complaints of  
5 violations of this Act. The Department may use an existing  
6 complaint system to fulfill the requirements of this Section.

7 (b) The Department may work with the Attorney General to  
8 verify complaints that the Attorney General's Office Health  
9 Care Bureau has received as set forth in Section 7.5.

10 (c) After receiving a complaint, the Department shall  
11 determine whether the hospital or approved pediatric health  
12 care facility is not in compliance with its approved plan or if  
13 a violation of any provision of this Act or rules adopted under  
14 this Act has occurred. Upon determining a violation of any  
15 provision of this Act or rules adopted under this Act has  
16 occurred, the Department shall issue a written notice of  
17 violation that includes the specific items of noncompliance to  
18 the hospital or approved pediatric health care facility.

19 (d) The hospital shall have 10 business days to submit to  
20 the Department a plan of correction that contains the  
21 hospital's or approved pediatric health care facility's  
22 specific proposals for correcting the items of noncompliance.  
23 The Department shall review the plan of correction and notify  
24 the hospital in writing within 10 business days as to whether  
25 the plan is acceptable or unacceptable. If the Department

1 finds the plan of correction unacceptable, the hospital or  
2 approved pediatric health care facility shall have 10 business  
3 days to resubmit an acceptable plan of correction. Upon  
4 notification that its plan of correction is acceptable, a  
5 hospital or approved pediatric health care facility shall  
6 implement the plan of correction within 60 days. The  
7 Department may conduct additional surveys or request  
8 documentation from the hospital or approved pediatric health  
9 care facility, as necessary, to ensure compliance with the  
10 accepted plan of correction.

11 (e) If the hospital or approved pediatric health care  
12 facility fails to submit an acceptable plan of correction or  
13 implement an accepted plan of correction within the time  
14 frames required in this Section, the Department may impose a  
15 fine as follows:

16 (1) at least \$1,500 but less than \$3,000 for a first  
17 violation; and

18 (2) at least \$3,000 but less than \$5,000 for a second  
19 or subsequent violation.

20 (f) In imposing a fine, the Department shall consider the  
21 following factors:

22 (1) the alleged violation or violations and the  
23 adequacy of the response by the hospital or pediatric  
24 facility;

25 (2) any historical pattern or practice of  
26 noncompliance with this Act;

1           (3) the number of patients seeking treatment and  
2           support from the hospital or pediatric facility affected  
3           by the violation.

4           (g) The Department's notice of violation shall include, at  
5           a minimum, the following:

6           (1) the hospital or approved pediatric health care  
7           facility's right to request an administrative hearing to  
8           contest the Department's notice of violation;

9           (2) an opportunity to present evidence, orally, in  
10           writing, or both, on the question of the alleged violation  
11           before an administrative law judge; and

12           (3) an opportunity to file an answer responding to the  
13           Department's notice of violation.

14           (h) The Department shall follow all rules of practice and  
15           procedure for hearings conducted under this Section pursuant  
16           to 77 Ill. Adm. Code Part 100. After an administrative hearing  
17           before an administrative law judge or hearing officer, the  
18           Director shall issue a final written decision, or a final  
19           order, based on the administrative law judge's findings of  
20           fact, conclusions of law, and recommendation. The final order  
21           shall also include the monetary penalty against such hospital  
22           or pediatric facility.

23           (i) The Attorney General may bring an action in the  
24           circuit court to enforce the collection of a monetary penalty  
25           imposed under this Section.

26           (j) The fines under this Section shall be deposited into

1 ~~the Sexual Assault Services Fund. Any hospital or approved~~  
2 ~~pediatric health care facility violating any provisions of~~  
3 ~~this Act other than Section 7.5 shall be guilty of a petty~~  
4 ~~offense for each violation, and any fine imposed shall be paid~~  
5 ~~into the general corporate funds of the city, incorporated~~  
6 ~~town or village in which the hospital or approved pediatric~~  
7 ~~health care facility is located, or of the county, in case such~~  
8 ~~hospital is outside the limits of any incorporated~~  
9 ~~municipality.~~

10 ~~(b) The Attorney General may seek the assessment of one or~~  
11 ~~more of the following civil monetary penalties in any action~~  
12 ~~filed under this Act where the hospital, approved pediatric~~  
13 ~~health care facility, health care professional, ambulance~~  
14 ~~provider, laboratory, or pharmacy knowingly violates Section~~  
15 ~~7.5 of the Act:~~

16 ~~(1) For willful violations of paragraphs (1), (2),~~  
17 ~~(4), or (5) of subsection (a) of Section 7.5 or subsection~~  
18 ~~(c) of Section 7.5, the civil monetary penalty shall not~~  
19 ~~exceed \$500 per violation.~~

20 ~~(2) For violations of paragraphs (1), (2), (4), or (5)~~  
21 ~~of subsection (a) of Section 7.5 or subsection (c) of~~  
22 ~~Section 7.5 involving a pattern or practice, the civil~~  
23 ~~monetary penalty shall not exceed \$500 per violation.~~

24 ~~(3) For violations of paragraph (3) of subsection (a)~~  
25 ~~of Section 7.5, the civil monetary penalty shall not~~  
26 ~~exceed \$500 for each day the bill is with a collection~~

1 ~~agency.~~

2 ~~(4) For violations involving the failure to submit~~  
3 ~~billing protocols within the time period required under~~  
4 ~~subsection (d) of Section 7.5, the civil monetary penalty~~  
5 ~~shall not exceed \$100 per day until the health care~~  
6 ~~professional or approved pediatric health care facility~~  
7 ~~complies with subsection (d) of Section 7.5.~~

8 ~~All civil monetary penalties shall be deposited into the~~  
9 ~~Violent Crime Victims Assistance Fund.~~

10 (k) ~~(e)~~ This Section is effective on and after January 1,  
11 2024.

12 (Source: P.A. 101-634, eff. 6-5-20; 102-22, eff. 6-25-21;  
13 102-674, eff. 11-30-21.)

14 (410 ILCS 70/10)

15 Sec. 10. Sexual Assault Nurse Examiner Program.

16 (a) The Sexual Assault Nurse Examiner Program is  
17 established within the Office of the Attorney General. ~~The~~  
18 ~~Sexual Assault Nurse Examiner Program shall maintain a list of~~  
19 ~~sexual assault nurse examiners who have completed didactic and~~  
20 ~~clinical training requirements consistent with the Sexual~~  
21 ~~Assault Nurse Examiner Education Guidelines established by the~~  
22 ~~International Association of Forensic Nurses.~~

23 (b) By March 1, 2019, the Sexual Assault Nurse Examiner  
24 Program shall develop and make available to hospitals 2 hours  
25 of online sexual assault training for emergency department

1 clinical staff to meet the training requirement established in  
2 subsection (a) of Section 2. Notwithstanding any other law  
3 regarding ongoing licensure requirements, such training shall  
4 count toward the continuing medical education and continuing  
5 nursing education credits for physicians, physician  
6 assistants, advanced practice registered nurses, and  
7 registered professional nurses.

8 The Sexual Assault Nurse Examiner Program shall provide  
9 didactic and clinical training opportunities consistent with  
10 the Sexual Assault Nurse Examiner Education Guidelines  
11 established by the International Association of Forensic  
12 Nurses, in sufficient numbers and geographical locations  
13 across the State, to assist hospitals with training the  
14 necessary number of sexual assault nurse examiners to comply  
15 with the requirement of this Act to employ or contract with a  
16 qualified medical provider to initiate a medical forensic  
17 examination ~~services~~ to a sexual assault survivor within 90  
18 minutes of the patient presenting to the hospital as required  
19 in subsection (a-7) of Section 5.

20 The Sexual Assault Nurse Examiner Program shall assist  
21 hospitals in establishing trainings to achieve the  
22 requirements of this Act.

23 For the purpose of providing continuing medical education  
24 credit in accordance with the Medical Practice Act of 1987 and  
25 administrative rules adopted under the Medical Practice Act of  
26 1987 and continuing education credit in accordance with the

1 Nurse Practice Act and administrative rules adopted under the  
2 Nurse Practice Act to health care professionals for the  
3 completion of sexual assault training provided by the Sexual  
4 Assault Nurse Examiner Program under this Act, the Office of  
5 the Attorney General shall be considered a State agency.

6 (c) The Sexual Assault Nurse Examiner Program, in  
7 consultation with qualified medical providers, shall create  
8 uniform materials that all hospitals ~~treatment hospitals,~~  
9 ~~treatment hospitals with approved pediatric transfer,~~ and  
10 approved pediatric health care facilities are required to give  
11 patients and non-offending parents or legal guardians, if  
12 applicable, regarding the medical forensic exam procedure,  
13 laws regarding consenting to medical forensic examinations  
14 ~~services~~, and the benefits and risks of evidence collection,  
15 including recommended time frames for evidence collection  
16 pursuant to evidence-based research. These materials shall be  
17 made available to all hospitals and approved pediatric health  
18 care facilities on the Office of the Attorney General's  
19 website.

20 (d) This Section is effective on and after January 1,  
21 2024.

22 (Source: P.A. 101-634, eff. 6-5-20; 102-22, eff. 6-25-21;  
23 102-674, eff. 11-30-21.)

24 (410 ILCS 70/15 new)

25 Sec. 15. Qualified medical provider list; Sexual Assault

1 Nurse Examiner and Sexual Assault Forensic Examiner  
2 qualifications.

3 (a) The Office of the Attorney General shall maintain a  
4 list of qualified medical providers, which includes health  
5 care professionals who have been qualified by the Sexual  
6 Assault Nurse Examiner Program Coordinator at the Office of  
7 the Attorney General to practice as an Adult/Adolescent or  
8 Pediatric/Adolescent Sexual Assault Nurse Examiner, or  
9 Adult/Adolescent or Pediatric/Adolescent Sexual Assault  
10 Forensic Examiner. The list may also include Board-certified  
11 and Board-eligible child abuse pediatricians.

12 (b) The Sexual Assault Nurse Examiner Program Coordinator  
13 shall review documentation submitted by health care  
14 professionals in accordance with this Section and ascertain  
15 whether standards for qualification are met:

16 (1) To be qualified as an Adult/Adolescent or  
17 Pediatric/Adolescent Sexual Assault Forensic Examiner, a  
18 physician or physician assistant shall submit  
19 documentation of didactic and clinical training, and  
20 clinical experience, that meets or is substantially  
21 similar to the Sexual Assault Nurse Examiner Education  
22 Guidelines, established by the International Association  
23 of Forensic Nurses. Didactic and clinical training shall  
24 be documented in the form and manner prescribed by the  
25 Office of the Attorney General.

26 (2) To be qualified as an Adult/Adolescent or

1 Pediatric/Adolescent Sexual Assault Nurse Examiner, an  
2 advanced practice registered nurse or registered  
3 professional nurse shall complete didactic and clinical  
4 training that is consistent with the Sexual Assault Nurse  
5 Examiner Education Guidelines established by the  
6 International Association of Forensic Nurses and approved  
7 by the Sexual Assault Nurse Examiner Program Coordinator.  
8 Didactic and clinical training shall be documented in the  
9 form and manner prescribed by the Office of the Attorney  
10 General.

11 A valid Sexual Assault Nurse Examiner certification by  
12 the International Association of Forensic Nurses is  
13 sufficient documentation for the Sexual Assault Nurse  
14 Examiner Program Coordinator to qualify an advanced  
15 practice registered nurse or registered professional nurse  
16 as a qualified medical provider.

17 (3) If a board-certified or board-eligible child abuse  
18 pediatrician is included in the current Directory of  
19 Healthcare Providers for Child Abuse and Neglect  
20 Investigations, published by the Pediatric Resource  
21 Center, or the successor report of a different name, then  
22 the Sexual Assault Nurse Examiner Program Coordinator may  
23 add that person to the list of qualified medical  
24 providers.

25 The Office of the Attorney General may require health care  
26 professionals to meet additional standards to be on the list,

1 if it is determined necessary at the time to ensure  
2 qualification is attained in accordance with applicable laws,  
3 rules, regulations, protocols, standards of care, and Sexual  
4 Assault Nurse Examiner Program goals.

5 (c) To remain on the Qualified Medical Provider List,  
6 Sexual Assault Nurse Examiners and Sexual Assault Forensic  
7 Examiners must verify their continuing education and  
8 competency as a qualified medical provider every 3 years.

9 Sexual Assault Nurse Examiners and Sexual Assault Forensic  
10 Examiners shall submit the following documentation to the  
11 Sexual Assault Nurse Examiner Program Coordinator by April  
12 30th of the verification year so the Sexual Assault Nurse  
13 Examiner Program Coordinator can ascertain whether standards  
14 to remain on the Qualified Medical Provider List have been  
15 met.

16 A valid Sexual Assault Nurse Examiner certification by the  
17 International Association of Forensic Nurses is sufficient  
18 documentation to verify a sexual assault nurse examiner's  
19 continued education and competency as a qualified medical  
20 provider.

21 In lieu of an updated, valid International Association of  
22 Forensic Nurses certification, the Sexual Assault Nurse  
23 Examiner Coordinator, Emergency Department Director, or the  
24 Director of the facility where the health care professional is  
25 employed shall attest to the health care professional's  
26 continuing education and competency as a qualified medical

1 provider. If the health care professional is contracted to  
2 work as a Sexual Assault nurse examiner or sexual assault  
3 forensic examiner, then the Sexual assault nurse examiner  
4 Coordinator or Director of the staffing company shall attest  
5 to the health care professional's continuing education and  
6 competency as a qualified medical provider. The attestation  
7 shall be in the form and manner prescribed by the Office of the  
8 Illinois Attorney General.

9 If the health care professional has had more than a  
10 one-year lapse in providing medical forensic examinations to  
11 patients, then a mock medical forensic examination must be  
12 completed for skill verification with a sexual assault nurse  
13 examiner certified by the International Association of  
14 Forensic Nursing.

15 If documentation is submitted by April 30, then the Sexual  
16 Assault Nurse Examiner Program Coordinator shall provide  
17 notice of whether standards to remain on the Qualified Medical  
18 Provider list have been met by June 30th of the same year. If  
19 the submission is insufficient, then the notice shall include  
20 a statement of deficiencies and the standards for  
21 qualification to be met. The health care professional shall  
22 have 30 days after the notice is sent to cure a deficient  
23 submission. If a health care professional does not meet the  
24 standards to be on the Qualified Medical Provider List after a  
25 period to cure an insufficient submission, then the health  
26 care professional shall be notified and removed from the

1 Qualified Medical Provider List. If a sexual assault nurse  
2 examiner or sexual assault forensic examiner on the Qualified  
3 Medical Provider list does not verify continued education and  
4 competency as a qualified medical provider after 3 years and  
5 does not submit documentation to the Sexual Assault Nurse  
6 Examiner Program Coordinator by April 30 of the verification  
7 year, then the health care professional shall be notified that  
8 they will be removed from the Qualified Medical Provider List  
9 in 60 days. The health care professional shall submit  
10 sufficient documentation to remain on the Qualified Medical  
11 Provider list within the 60-day period or be removed from the  
12 Qualified Medical Provider List.

13 (d) This Section is effective on and after January 1,  
14 2026.

15 (410 ILCS 70/2.1 rep.)

16 (410 ILCS 70/8.5 rep.)

17 Section 10. The Sexual Assault Survivors Emergency  
18 Treatment Act is amended by repealing Sections 2.1 and 8.5.