

1 AN ACT concerning regulation.

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

4 Section 5. The Illinois Health Facilities Planning Act is  
5 amended by changing Sections 3 and 13 as follows:

6 (20 ILCS 3960/3) (from Ch. 111 1/2, par. 1153)

7 (Text of Section before amendment by P.A. 100-518)

8 (Section scheduled to be repealed on December 31, 2019)

9 Sec. 3. Definitions. As used in this Act:

10 "Health care facilities" means and includes the following  
11 facilities, organizations, and related persons:

12 (1) An ambulatory surgical treatment center required  
13 to be licensed pursuant to the Ambulatory Surgical  
14 Treatment Center Act.

15 (2) An institution, place, building, or agency  
16 required to be licensed pursuant to the Hospital Licensing  
17 Act.

18 (3) Skilled and intermediate long term care facilities  
19 licensed under the Nursing Home Care Act.

20 (A) If a demonstration project under the Nursing  
21 Home Care Act applies for a certificate of need to  
22 convert to a nursing facility, it shall meet the  
23 licensure and certificate of need requirements in

1 effect as of the date of application.

2 (B) Except as provided in item (A) of this  
3 subsection, this Act does not apply to facilities  
4 granted waivers under Section 3-102.2 of the Nursing  
5 Home Care Act.

6 (3.5) Skilled and intermediate care facilities  
7 licensed under the ID/DD Community Care Act or the MC/DD  
8 Act. No permit or exemption is required for a facility  
9 licensed under the ID/DD Community Care Act or the MC/DD  
10 Act prior to the reduction of the number of beds at a  
11 facility. If there is a total reduction of beds at a  
12 facility licensed under the ID/DD Community Care Act or the  
13 MC/DD Act, this is a discontinuation or closure of the  
14 facility. If a facility licensed under the ID/DD Community  
15 Care Act or the MC/DD Act reduces the number of beds or  
16 discontinues the facility, that facility must notify the  
17 Board as provided in Section 14.1 of this Act.

18 (3.7) Facilities licensed under the Specialized Mental  
19 Health Rehabilitation Act of 2013.

20 (4) Hospitals, nursing homes, ambulatory surgical  
21 treatment centers, or kidney disease treatment centers  
22 maintained by the State or any department or agency  
23 thereof.

24 (5) Kidney disease treatment centers, including a  
25 free-standing hemodialysis unit required to meet the  
26 requirements of 42 CFR 494 in order to be certified for

1       participation in Medicare and Medicaid under Titles XVIII  
2       and XIX of the federal Social Security Act ~~be licensed~~  
3       ~~under the End Stage Renal Disease Facility Act.~~

4               (A) This Act does not apply to a dialysis facility  
5               that provides only dialysis training, support, and  
6               related services to individuals with end stage renal  
7               disease who have elected to receive home dialysis.

8               (B) This Act does not apply to a dialysis unit  
9               located in a licensed nursing home that offers or  
10              provides dialysis-related services to residents with  
11              end stage renal disease who have elected to receive  
12              home dialysis within the nursing home.

13              (C) The Board, however, may require dialysis  
14              facilities and licensed nursing homes under items (A)  
15              and (B) of this subsection to report statistical  
16              information on a quarterly basis to the Board to be  
17              used by the Board to conduct analyses on the need for  
18              proposed kidney disease treatment centers.

19              (6) An institution, place, building, or room used for  
20              the performance of outpatient surgical procedures that is  
21              leased, owned, or operated by or on behalf of an  
22              out-of-state facility.

23              (7) An institution, place, building, or room used for  
24              provision of a health care category of service, including,  
25              but not limited to, cardiac catheterization and open heart  
26              surgery.

1           (8) An institution, place, building, or room housing  
2           major medical equipment used in the direct clinical  
3           diagnosis or treatment of patients, and whose project cost  
4           is in excess of the capital expenditure minimum.

5           "Health care facilities" does not include the following  
6           entities or facility transactions:

7           (1) Federally-owned facilities.

8           (2) Facilities used solely for healing by prayer or  
9           spiritual means.

10          (3) An existing facility located on any campus facility  
11          as defined in Section 5-5.8b of the Illinois Public Aid  
12          Code, provided that the campus facility encompasses 30 or  
13          more contiguous acres and that the new or renovated  
14          facility is intended for use by a licensed residential  
15          facility.

16          (4) Facilities licensed under the Supportive  
17          Residences Licensing Act or the Assisted Living and Shared  
18          Housing Act.

19          (5) Facilities designated as supportive living  
20          facilities that are in good standing with the program  
21          established under Section 5-5.01a of the Illinois Public  
22          Aid Code.

23          (6) Facilities established and operating under the  
24          Alternative Health Care Delivery Act as a children's  
25          community-based health care center alternative health care  
26          model demonstration program or as an Alzheimer's Disease

1 Management Center alternative health care model  
2 demonstration program.

3 (7) The closure of an entity or a portion of an entity  
4 licensed under the Nursing Home Care Act, the Specialized  
5 Mental Health Rehabilitation Act of 2013, the ID/DD  
6 Community Care Act, or the MC/DD Act, with the exception of  
7 facilities operated by a county or Illinois Veterans Homes,  
8 that elect to convert, in whole or in part, to an assisted  
9 living or shared housing establishment licensed under the  
10 Assisted Living and Shared Housing Act and with the  
11 exception of a facility licensed under the Specialized  
12 Mental Health Rehabilitation Act of 2013 in connection with  
13 a proposal to close a facility and re-establish the  
14 facility in another location.

15 (8) Any change of ownership of a health care facility  
16 that is licensed under the Nursing Home Care Act, the  
17 Specialized Mental Health Rehabilitation Act of 2013, the  
18 ID/DD Community Care Act, or the MC/DD Act, with the  
19 exception of facilities operated by a county or Illinois  
20 Veterans Homes. Changes of ownership of facilities  
21 licensed under the Nursing Home Care Act must meet the  
22 requirements set forth in Sections 3-101 through 3-119 of  
23 the Nursing Home Care Act.

24 With the exception of those health care facilities  
25 specifically included in this Section, nothing in this Act  
26 shall be intended to include facilities operated as a part of

1 the practice of a physician or other licensed health care  
2 professional, whether practicing in his individual capacity or  
3 within the legal structure of any partnership, medical or  
4 professional corporation, or unincorporated medical or  
5 professional group. Further, this Act shall not apply to  
6 physicians or other licensed health care professional's  
7 practices where such practices are carried out in a portion of  
8 a health care facility under contract with such health care  
9 facility by a physician or by other licensed health care  
10 professionals, whether practicing in his individual capacity  
11 or within the legal structure of any partnership, medical or  
12 professional corporation, or unincorporated medical or  
13 professional groups, unless the entity constructs, modifies,  
14 or establishes a health care facility as specifically defined  
15 in this Section. This Act shall apply to construction or  
16 modification and to establishment by such health care facility  
17 of such contracted portion which is subject to facility  
18 licensing requirements, irrespective of the party responsible  
19 for such action or attendant financial obligation.

20 "Person" means any one or more natural persons, legal  
21 entities, governmental bodies other than federal, or any  
22 combination thereof.

23 "Consumer" means any person other than a person (a) whose  
24 major occupation currently involves or whose official capacity  
25 within the last 12 months has involved the providing,  
26 administering or financing of any type of health care facility,

1 (b) who is engaged in health research or the teaching of  
2 health, (c) who has a material financial interest in any  
3 activity which involves the providing, administering or  
4 financing of any type of health care facility, or (d) who is or  
5 ever has been a member of the immediate family of the person  
6 defined by (a), (b), or (c).

7 "State Board" or "Board" means the Health Facilities and  
8 Services Review Board.

9 "Construction or modification" means the establishment,  
10 erection, building, alteration, reconstruction, modernization,  
11 improvement, extension, discontinuation, change of ownership,  
12 of or by a health care facility, or the purchase or acquisition  
13 by or through a health care facility of equipment or service  
14 for diagnostic or therapeutic purposes or for facility  
15 administration or operation, or any capital expenditure made by  
16 or on behalf of a health care facility which exceeds the  
17 capital expenditure minimum; however, any capital expenditure  
18 made by or on behalf of a health care facility for (i) the  
19 construction or modification of a facility licensed under the  
20 Assisted Living and Shared Housing Act or (ii) a conversion  
21 project undertaken in accordance with Section 30 of the Older  
22 Adult Services Act shall be excluded from any obligations under  
23 this Act.

24 "Establish" means the construction of a health care  
25 facility or the replacement of an existing facility on another  
26 site or the initiation of a category of service.

1 "Major medical equipment" means medical equipment which is  
2 used for the provision of medical and other health services and  
3 which costs in excess of the capital expenditure minimum,  
4 except that such term does not include medical equipment  
5 acquired by or on behalf of a clinical laboratory to provide  
6 clinical laboratory services if the clinical laboratory is  
7 independent of a physician's office and a hospital and it has  
8 been determined under Title XVIII of the Social Security Act to  
9 meet the requirements of paragraphs (10) and (11) of Section  
10 1861(s) of such Act. In determining whether medical equipment  
11 has a value in excess of the capital expenditure minimum, the  
12 value of studies, surveys, designs, plans, working drawings,  
13 specifications, and other activities essential to the  
14 acquisition of such equipment shall be included.

15 "Capital Expenditure" means an expenditure: (A) made by or  
16 on behalf of a health care facility (as such a facility is  
17 defined in this Act); and (B) which under generally accepted  
18 accounting principles is not properly chargeable as an expense  
19 of operation and maintenance, or is made to obtain by lease or  
20 comparable arrangement any facility or part thereof or any  
21 equipment for a facility or part; and which exceeds the capital  
22 expenditure minimum.

23 For the purpose of this paragraph, the cost of any studies,  
24 surveys, designs, plans, working drawings, specifications, and  
25 other activities essential to the acquisition, improvement,  
26 expansion, or replacement of any plant or equipment with



1 respect to which an expenditure is made shall be included in  
2 determining if such expenditure exceeds the capital  
3 expenditures minimum. Unless otherwise interdependent, or  
4 submitted as one project by the applicant, components of  
5 construction or modification undertaken by means of a single  
6 construction contract or financed through the issuance of a  
7 single debt instrument shall not be grouped together as one  
8 project. Donations of equipment or facilities to a health care  
9 facility which if acquired directly by such facility would be  
10 subject to review under this Act shall be considered capital  
11 expenditures, and a transfer of equipment or facilities for  
12 less than fair market value shall be considered a capital  
13 expenditure for purposes of this Act if a transfer of the  
14 equipment or facilities at fair market value would be subject  
15 to review.

16 "Capital expenditure minimum" means \$11,500,000 for  
17 projects by hospital applicants, \$6,500,000 for applicants for  
18 projects related to skilled and intermediate care long-term  
19 care facilities licensed under the Nursing Home Care Act, and  
20 \$3,000,000 for projects by all other applicants, which shall be  
21 annually adjusted to reflect the increase in construction costs  
22 due to inflation, for major medical equipment and for all other  
23 capital expenditures.

24 "Non-clinical service area" means an area (i) for the  
25 benefit of the patients, visitors, staff, or employees of a  
26 health care facility and (ii) not directly related to the

1 diagnosis, treatment, or rehabilitation of persons receiving  
2 services from the health care facility. "Non-clinical service  
3 areas" include, but are not limited to, chapels; gift shops;  
4 news stands; computer systems; tunnels, walkways, and  
5 elevators; telephone systems; projects to comply with life  
6 safety codes; educational facilities; student housing;  
7 patient, employee, staff, and visitor dining areas;  
8 administration and volunteer offices; modernization of  
9 structural components (such as roof replacement and masonry  
10 work); boiler repair or replacement; vehicle maintenance and  
11 storage facilities; parking facilities; mechanical systems for  
12 heating, ventilation, and air conditioning; loading docks; and  
13 repair or replacement of carpeting, tile, wall coverings,  
14 window coverings or treatments, or furniture. Solely for the  
15 purpose of this definition, "non-clinical service area" does  
16 not include health and fitness centers.

17 "Areawide" means a major area of the State delineated on a  
18 geographic, demographic, and functional basis for health  
19 planning and for health service and having within it one or  
20 more local areas for health planning and health service. The  
21 term "region", as contrasted with the term "subregion", and the  
22 word "area" may be used synonymously with the term "areawide".

23 "Local" means a subarea of a delineated major area that on  
24 a geographic, demographic, and functional basis may be  
25 considered to be part of such major area. The term "subregion"  
26 may be used synonymously with the term "local".

1 "Physician" means a person licensed to practice in  
2 accordance with the Medical Practice Act of 1987, as amended.

3 "Licensed health care professional" means a person  
4 licensed to practice a health profession under pertinent  
5 licensing statutes of the State of Illinois.

6 "Director" means the Director of the Illinois Department of  
7 Public Health.

8 "Agency" or "Department" means the Illinois Department of  
9 Public Health.

10 "Alternative health care model" means a facility or program  
11 authorized under the Alternative Health Care Delivery Act.

12 "Out-of-state facility" means a person that is both (i)  
13 licensed as a hospital or as an ambulatory surgery center under  
14 the laws of another state or that qualifies as a hospital or an  
15 ambulatory surgery center under regulations adopted pursuant  
16 to the Social Security Act and (ii) not licensed under the  
17 Ambulatory Surgical Treatment Center Act, the Hospital  
18 Licensing Act, or the Nursing Home Care Act. Affiliates of  
19 out-of-state facilities shall be considered out-of-state  
20 facilities. Affiliates of Illinois licensed health care  
21 facilities 100% owned by an Illinois licensed health care  
22 facility, its parent, or Illinois physicians licensed to  
23 practice medicine in all its branches shall not be considered  
24 out-of-state facilities. Nothing in this definition shall be  
25 construed to include an office or any part of an office of a  
26 physician licensed to practice medicine in all its branches in

1 Illinois that is not required to be licensed under the  
2 Ambulatory Surgical Treatment Center Act.

3 "Change of ownership of a health care facility" means a  
4 change in the person who has ownership or control of a health  
5 care facility's physical plant and capital assets. A change in  
6 ownership is indicated by the following transactions: sale,  
7 transfer, acquisition, lease, change of sponsorship, or other  
8 means of transferring control.

9 "Related person" means any person that: (i) is at least 50%  
10 owned, directly or indirectly, by either the health care  
11 facility or a person owning, directly or indirectly, at least  
12 50% of the health care facility; or (ii) owns, directly or  
13 indirectly, at least 50% of the health care facility.

14 "Charity care" means care provided by a health care  
15 facility for which the provider does not expect to receive  
16 payment from the patient or a third-party payer.

17 "Freestanding emergency center" means a facility subject  
18 to licensure under Section 32.5 of the Emergency Medical  
19 Services (EMS) Systems Act.

20 "Category of service" means a grouping by generic class of  
21 various types or levels of support functions, equipment, care,  
22 or treatment provided to patients or residents, including, but  
23 not limited to, classes such as medical-surgical, pediatrics,  
24 or cardiac catheterization. A category of service may include  
25 subcategories or levels of care that identify a particular  
26 degree or type of care within the category of service. Nothing

1 in this definition shall be construed to include the practice  
2 of a physician or other licensed health care professional while  
3 functioning in an office providing for the care, diagnosis, or  
4 treatment of patients. A category of service that is subject to  
5 the Board's jurisdiction must be designated in rules adopted by  
6 the Board.

7 "State Board Staff Report" means the document that sets  
8 forth the review and findings of the State Board staff, as  
9 prescribed by the State Board, regarding applications subject  
10 to Board jurisdiction.

11 (Source: P.A. 98-414, eff. 1-1-14; 98-629, eff. 1-1-15; 98-651,  
12 eff. 6-16-14; 98-1086, eff. 8-26-14; 99-78, eff. 7-20-15;  
13 99-180, eff. 7-29-15; 99-527, eff. 1-1-17.)

14 (Text of Section after amendment by P.A. 100-518)

15 (Section scheduled to be repealed on December 31, 2019)

16 Sec. 3. Definitions. As used in this Act:

17 "Health care facilities" means and includes the following  
18 facilities, organizations, and related persons:

19 (1) An ambulatory surgical treatment center required  
20 to be licensed pursuant to the Ambulatory Surgical  
21 Treatment Center Act.

22 (2) An institution, place, building, or agency  
23 required to be licensed pursuant to the Hospital Licensing  
24 Act.

25 (3) Skilled and intermediate long term care facilities

1 licensed under the Nursing Home Care Act.

2 (A) If a demonstration project under the Nursing  
3 Home Care Act applies for a certificate of need to  
4 convert to a nursing facility, it shall meet the  
5 licensure and certificate of need requirements in  
6 effect as of the date of application.

7 (B) Except as provided in item (A) of this  
8 subsection, this Act does not apply to facilities  
9 granted waivers under Section 3-102.2 of the Nursing  
10 Home Care Act.

11 (3.5) Skilled and intermediate care facilities  
12 licensed under the ID/DD Community Care Act or the MC/DD  
13 Act. No permit or exemption is required for a facility  
14 licensed under the ID/DD Community Care Act or the MC/DD  
15 Act prior to the reduction of the number of beds at a  
16 facility. If there is a total reduction of beds at a  
17 facility licensed under the ID/DD Community Care Act or the  
18 MC/DD Act, this is a discontinuation or closure of the  
19 facility. If a facility licensed under the ID/DD Community  
20 Care Act or the MC/DD Act reduces the number of beds or  
21 discontinues the facility, that facility must notify the  
22 Board as provided in Section 14.1 of this Act.

23 (3.7) Facilities licensed under the Specialized Mental  
24 Health Rehabilitation Act of 2013.

25 (4) Hospitals, nursing homes, ambulatory surgical  
26 treatment centers, or kidney disease treatment centers

1 maintained by the State or any department or agency  
2 thereof.

3 (5) Kidney disease treatment centers, including a  
4 free-standing hemodialysis unit required to meet the  
5 requirements of 42 CFR 494 in order to be certified for  
6 participation in Medicare and Medicaid under Titles XVIII  
7 and XIX of the federal Social Security Act ~~be licensed~~  
8 ~~under the End Stage Renal Disease Facility Act.~~

9 (A) This Act does not apply to a dialysis facility  
10 that provides only dialysis training, support, and  
11 related services to individuals with end stage renal  
12 disease who have elected to receive home dialysis.

13 (B) This Act does not apply to a dialysis unit  
14 located in a licensed nursing home that offers or  
15 provides dialysis-related services to residents with  
16 end stage renal disease who have elected to receive  
17 home dialysis within the nursing home.

18 (C) The Board, however, may require dialysis  
19 facilities and licensed nursing homes under items (A)  
20 and (B) of this subsection to report statistical  
21 information on a quarterly basis to the Board to be  
22 used by the Board to conduct analyses on the need for  
23 proposed kidney disease treatment centers.

24 (6) An institution, place, building, or room used for  
25 the performance of outpatient surgical procedures that is  
26 leased, owned, or operated by or on behalf of an

1 out-of-state facility.

2 (7) An institution, place, building, or room used for  
3 provision of a health care category of service, including,  
4 but not limited to, cardiac catheterization and open heart  
5 surgery.

6 (8) An institution, place, building, or room housing  
7 major medical equipment used in the direct clinical  
8 diagnosis or treatment of patients, and whose project cost  
9 is in excess of the capital expenditure minimum.

10 "Health care facilities" does not include the following  
11 entities or facility transactions:

12 (1) Federally-owned facilities.

13 (2) Facilities used solely for healing by prayer or  
14 spiritual means.

15 (3) An existing facility located on any campus facility  
16 as defined in Section 5-5.8b of the Illinois Public Aid  
17 Code, provided that the campus facility encompasses 30 or  
18 more contiguous acres and that the new or renovated  
19 facility is intended for use by a licensed residential  
20 facility.

21 (4) Facilities licensed under the Supportive  
22 Residences Licensing Act or the Assisted Living and Shared  
23 Housing Act.

24 (5) Facilities designated as supportive living  
25 facilities that are in good standing with the program  
26 established under Section 5-5.01a of the Illinois Public



1 Aid Code.

2 (6) Facilities established and operating under the  
3 Alternative Health Care Delivery Act as a children's  
4 community-based health care center alternative health care  
5 model demonstration program or as an Alzheimer's Disease  
6 Management Center alternative health care model  
7 demonstration program.

8 (7) The closure of an entity or a portion of an entity  
9 licensed under the Nursing Home Care Act, the Specialized  
10 Mental Health Rehabilitation Act of 2013, the ID/DD  
11 Community Care Act, or the MC/DD Act, with the exception of  
12 facilities operated by a county or Illinois Veterans Homes,  
13 that elect to convert, in whole or in part, to an assisted  
14 living or shared housing establishment licensed under the  
15 Assisted Living and Shared Housing Act and with the  
16 exception of a facility licensed under the Specialized  
17 Mental Health Rehabilitation Act of 2013 in connection with  
18 a proposal to close a facility and re-establish the  
19 facility in another location.

20 (8) Any change of ownership of a health care facility  
21 that is licensed under the Nursing Home Care Act, the  
22 Specialized Mental Health Rehabilitation Act of 2013, the  
23 ID/DD Community Care Act, or the MC/DD Act, with the  
24 exception of facilities operated by a county or Illinois  
25 Veterans Homes. Changes of ownership of facilities  
26 licensed under the Nursing Home Care Act must meet the

1 requirements set forth in Sections 3-101 through 3-119 of  
2 the Nursing Home Care Act.

3 With the exception of those health care facilities  
4 specifically included in this Section, nothing in this Act  
5 shall be intended to include facilities operated as a part of  
6 the practice of a physician or other licensed health care  
7 professional, whether practicing in his individual capacity or  
8 within the legal structure of any partnership, medical or  
9 professional corporation, or unincorporated medical or  
10 professional group. Further, this Act shall not apply to  
11 physicians or other licensed health care professional's  
12 practices where such practices are carried out in a portion of  
13 a health care facility under contract with such health care  
14 facility by a physician or by other licensed health care  
15 professionals, whether practicing in his individual capacity  
16 or within the legal structure of any partnership, medical or  
17 professional corporation, or unincorporated medical or  
18 professional groups, unless the entity constructs, modifies,  
19 or establishes a health care facility as specifically defined  
20 in this Section. This Act shall apply to construction or  
21 modification and to establishment by such health care facility  
22 of such contracted portion which is subject to facility  
23 licensing requirements, irrespective of the party responsible  
24 for such action or attendant financial obligation.

25 "Person" means any one or more natural persons, legal  
26 entities, governmental bodies other than federal, or any

1 combination thereof.

2 "Consumer" means any person other than a person (a) whose  
3 major occupation currently involves or whose official capacity  
4 within the last 12 months has involved the providing,  
5 administering or financing of any type of health care facility,  
6 (b) who is engaged in health research or the teaching of  
7 health, (c) who has a material financial interest in any  
8 activity which involves the providing, administering or  
9 financing of any type of health care facility, or (d) who is or  
10 ever has been a member of the immediate family of the person  
11 defined by (a), (b), or (c).

12 "State Board" or "Board" means the Health Facilities and  
13 Services Review Board.

14 "Construction or modification" means the establishment,  
15 erection, building, alteration, reconstruction, modernization,  
16 improvement, extension, discontinuation, change of ownership,  
17 of or by a health care facility, or the purchase or acquisition  
18 by or through a health care facility of equipment or service  
19 for diagnostic or therapeutic purposes or for facility  
20 administration or operation, or any capital expenditure made by  
21 or on behalf of a health care facility which exceeds the  
22 capital expenditure minimum; however, any capital expenditure  
23 made by or on behalf of a health care facility for (i) the  
24 construction or modification of a facility licensed under the  
25 Assisted Living and Shared Housing Act or (ii) a conversion  
26 project undertaken in accordance with Section 30 of the Older

1 Adult Services Act shall be excluded from any obligations under  
2 this Act.

3 "Establish" means the construction of a health care  
4 facility or the replacement of an existing facility on another  
5 site or the initiation of a category of service.

6 "Major medical equipment" means medical equipment which is  
7 used for the provision of medical and other health services and  
8 which costs in excess of the capital expenditure minimum,  
9 except that such term does not include medical equipment  
10 acquired by or on behalf of a clinical laboratory to provide  
11 clinical laboratory services if the clinical laboratory is  
12 independent of a physician's office and a hospital and it has  
13 been determined under Title XVIII of the Social Security Act to  
14 meet the requirements of paragraphs (10) and (11) of Section  
15 1861(s) of such Act. In determining whether medical equipment  
16 has a value in excess of the capital expenditure minimum, the  
17 value of studies, surveys, designs, plans, working drawings,  
18 specifications, and other activities essential to the  
19 acquisition of such equipment shall be included.

20 "Capital Expenditure" means an expenditure: (A) made by or  
21 on behalf of a health care facility (as such a facility is  
22 defined in this Act); and (B) which under generally accepted  
23 accounting principles is not properly chargeable as an expense  
24 of operation and maintenance, or is made to obtain by lease or  
25 comparable arrangement any facility or part thereof or any  
26 equipment for a facility or part; and which exceeds the capital

1 expenditure minimum.

2 For the purpose of this paragraph, the cost of any studies,  
3 surveys, designs, plans, working drawings, specifications, and  
4 other activities essential to the acquisition, improvement,  
5 expansion, or replacement of any plant or equipment with  
6 respect to which an expenditure is made shall be included in  
7 determining if such expenditure exceeds the capital  
8 expenditures minimum. Unless otherwise interdependent, or  
9 submitted as one project by the applicant, components of  
10 construction or modification undertaken by means of a single  
11 construction contract or financed through the issuance of a  
12 single debt instrument shall not be grouped together as one  
13 project. Donations of equipment or facilities to a health care  
14 facility which if acquired directly by such facility would be  
15 subject to review under this Act shall be considered capital  
16 expenditures, and a transfer of equipment or facilities for  
17 less than fair market value shall be considered a capital  
18 expenditure for purposes of this Act if a transfer of the  
19 equipment or facilities at fair market value would be subject  
20 to review.

21 "Capital expenditure minimum" means \$11,500,000 for  
22 projects by hospital applicants, \$6,500,000 for applicants for  
23 projects related to skilled and intermediate care long-term  
24 care facilities licensed under the Nursing Home Care Act, and  
25 \$3,000,000 for projects by all other applicants, which shall be  
26 annually adjusted to reflect the increase in construction costs

1 due to inflation, for major medical equipment and for all other  
2 capital expenditures.

3 "Financial Commitment" means the commitment of at least 33%  
4 of total funds assigned to cover total project cost, which  
5 occurs by the actual expenditure of 33% or more of the total  
6 project cost or the commitment to expend 33% or more of the  
7 total project cost by signed contracts or other legal means.

8 "Non-clinical service area" means an area (i) for the  
9 benefit of the patients, visitors, staff, or employees of a  
10 health care facility and (ii) not directly related to the  
11 diagnosis, treatment, or rehabilitation of persons receiving  
12 services from the health care facility. "Non-clinical service  
13 areas" include, but are not limited to, chapels; gift shops;  
14 news stands; computer systems; tunnels, walkways, and  
15 elevators; telephone systems; projects to comply with life  
16 safety codes; educational facilities; student housing;  
17 patient, employee, staff, and visitor dining areas;  
18 administration and volunteer offices; modernization of  
19 structural components (such as roof replacement and masonry  
20 work); boiler repair or replacement; vehicle maintenance and  
21 storage facilities; parking facilities; mechanical systems for  
22 heating, ventilation, and air conditioning; loading docks; and  
23 repair or replacement of carpeting, tile, wall coverings,  
24 window coverings or treatments, or furniture. Solely for the  
25 purpose of this definition, "non-clinical service area" does  
26 not include health and fitness centers.

1 "Areawide" means a major area of the State delineated on a  
2 geographic, demographic, and functional basis for health  
3 planning and for health service and having within it one or  
4 more local areas for health planning and health service. The  
5 term "region", as contrasted with the term "subregion", and the  
6 word "area" may be used synonymously with the term "areawide".

7 "Local" means a subarea of a delineated major area that on  
8 a geographic, demographic, and functional basis may be  
9 considered to be part of such major area. The term "subregion"  
10 may be used synonymously with the term "local".

11 "Physician" means a person licensed to practice in  
12 accordance with the Medical Practice Act of 1987, as amended.

13 "Licensed health care professional" means a person  
14 licensed to practice a health profession under pertinent  
15 licensing statutes of the State of Illinois.

16 "Director" means the Director of the Illinois Department of  
17 Public Health.

18 "Agency" or "Department" means the Illinois Department of  
19 Public Health.

20 "Alternative health care model" means a facility or program  
21 authorized under the Alternative Health Care Delivery Act.

22 "Out-of-state facility" means a person that is both (i)  
23 licensed as a hospital or as an ambulatory surgery center under  
24 the laws of another state or that qualifies as a hospital or an  
25 ambulatory surgery center under regulations adopted pursuant  
26 to the Social Security Act and (ii) not licensed under the

1 Ambulatory Surgical Treatment Center Act, the Hospital  
2 Licensing Act, or the Nursing Home Care Act. Affiliates of  
3 out-of-state facilities shall be considered out-of-state  
4 facilities. Affiliates of Illinois licensed health care  
5 facilities 100% owned by an Illinois licensed health care  
6 facility, its parent, or Illinois physicians licensed to  
7 practice medicine in all its branches shall not be considered  
8 out-of-state facilities. Nothing in this definition shall be  
9 construed to include an office or any part of an office of a  
10 physician licensed to practice medicine in all its branches in  
11 Illinois that is not required to be licensed under the  
12 Ambulatory Surgical Treatment Center Act.

13 "Change of ownership of a health care facility" means a  
14 change in the person who has ownership or control of a health  
15 care facility's physical plant and capital assets. A change in  
16 ownership is indicated by the following transactions: sale,  
17 transfer, acquisition, lease, change of sponsorship, or other  
18 means of transferring control.

19 "Related person" means any person that: (i) is at least 50%  
20 owned, directly or indirectly, by either the health care  
21 facility or a person owning, directly or indirectly, at least  
22 50% of the health care facility; or (ii) owns, directly or  
23 indirectly, at least 50% of the health care facility.

24 "Charity care" means care provided by a health care  
25 facility for which the provider does not expect to receive  
26 payment from the patient or a third-party payer.



1 "Freestanding emergency center" means a facility subject  
2 to licensure under Section 32.5 of the Emergency Medical  
3 Services (EMS) Systems Act.

4 "Category of service" means a grouping by generic class of  
5 various types or levels of support functions, equipment, care,  
6 or treatment provided to patients or residents, including, but  
7 not limited to, classes such as medical-surgical, pediatrics,  
8 or cardiac catheterization. A category of service may include  
9 subcategories or levels of care that identify a particular  
10 degree or type of care within the category of service. Nothing  
11 in this definition shall be construed to include the practice  
12 of a physician or other licensed health care professional while  
13 functioning in an office providing for the care, diagnosis, or  
14 treatment of patients. A category of service that is subject to  
15 the Board's jurisdiction must be designated in rules adopted by  
16 the Board.

17 "State Board Staff Report" means the document that sets  
18 forth the review and findings of the State Board staff, as  
19 prescribed by the State Board, regarding applications subject  
20 to Board jurisdiction.

21 (Source: P.A. 99-78, eff. 7-20-15; 99-180, eff. 7-29-15;  
22 99-527, eff. 1-1-17; 100-518, eff. 6-1-18.)

23 (20 ILCS 3960/13) (from Ch. 111 1/2, par. 1163)

24 (Section scheduled to be repealed on December 31, 2019)

25 Sec. 13. Investigation of applications for permits and

1 certificates of recognition. The State Board shall make or  
2 cause to be made such investigations as it deems necessary in  
3 connection with an application for a permit or an application  
4 for a certificate of recognition, or in connection with a  
5 determination of whether or not construction or modification  
6 which has been commenced is in accord with the permit issued by  
7 the State Board or whether construction or modification has  
8 been commenced without a permit having been obtained. The State  
9 Board may issue subpoenas duces tecum requiring the production  
10 of records and may administer oaths to such witnesses.

11 Any circuit court of this State, upon the application of  
12 the State Board or upon the application of any party to such  
13 proceedings, may, in its discretion, compel the attendance of  
14 witnesses, the production of books, papers, records, or  
15 memoranda and the giving of testimony before the State Board,  
16 by a proceeding as for contempt, or otherwise, in the same  
17 manner as production of evidence may be compelled before the  
18 court.

19 The State Board shall require all health facilities  
20 operating in this State to provide such reasonable reports at  
21 such times and containing such information as is needed by it  
22 to carry out the purposes and provisions of this Act. Prior to  
23 collecting information from health facilities, the State Board  
24 shall make reasonable efforts through a public process to  
25 consult with health facilities and associations that represent  
26 them to determine whether data and information requests will

1 result in useful information for health planning, whether  
2 sufficient information is available from other sources, and  
3 whether data requested is routinely collected by health  
4 facilities and is available without retrospective record  
5 review. Data and information requests shall not impose undue  
6 paperwork burdens on health care facilities and personnel.  
7 Health facilities not complying with this requirement shall be  
8 reported to licensing, accrediting, certifying, or payment  
9 agencies as being in violation of State law. Health care  
10 facilities and other parties at interest shall have reasonable  
11 access, under rules established by the State Board, to all  
12 planning information submitted in accord with this Act  
13 pertaining to their area.

14 Among the reports to be required by the State Board are  
15 facility questionnaires for health care facilities licensed  
16 under the Ambulatory Surgical Treatment Center Act, the  
17 Hospital Licensing Act, the Nursing Home Care Act, the ID/DD  
18 Community Care Act, the MC/DD Act, or the Specialized Mental  
19 Health Rehabilitation Act of 2013 and health care facilities  
20 that are required to meet the requirements of 42 CFR 494 in  
21 order to be certified for participation in Medicare and  
22 Medicaid under Titles XVIII and XIX of the federal Social  
23 Security Act ~~, or the End Stage Renal Disease Facility Act.~~  
24 These questionnaires shall be conducted on an annual basis and  
25 compiled by the State Board. For health care facilities  
26 licensed under the Nursing Home Care Act or the Specialized

1 Mental Health Rehabilitation Act of 2013, these reports shall  
2 include, but not be limited to, the identification of specialty  
3 services provided by the facility to patients, residents, and  
4 the community at large. Annual reports for facilities licensed  
5 under the ID/DD Community Care Act and facilities licensed  
6 under the MC/DD Act shall be different from the annual reports  
7 required of other health care facilities and shall be specific  
8 to those facilities licensed under the ID/DD Community Care Act  
9 or the MC/DD Act. The Health Facilities and Services Review  
10 Board shall consult with associations representing facilities  
11 licensed under the ID/DD Community Care Act and associations  
12 representing facilities licensed under the MC/DD Act when  
13 developing the information requested in these annual reports.  
14 For health care facilities that contain long term care beds,  
15 the reports shall also include the number of staffed long term  
16 care beds, physical capacity for long term care beds at the  
17 facility, and long term care beds available for immediate  
18 occupancy. For purposes of this paragraph, "long term care  
19 beds" means beds (i) licensed under the Nursing Home Care Act,  
20 (ii) licensed under the ID/DD Community Care Act, (iii)  
21 licensed under the MC/DD Act, (iv) licensed under the Hospital  
22 Licensing Act, or (v) licensed under the Specialized Mental  
23 Health Rehabilitation Act of 2013 and certified as skilled  
24 nursing or nursing facility beds under Medicaid or Medicare.  
25 (Source: P.A. 98-1086, eff. 8-26-14; 99-180, eff. 7-29-15.)

1 (30 ILCS 105/5.590 rep.)

2 Section 10. The State Finance Act is amended by repealing  
3 Section 5.590.

4 (210 ILCS 62/Act rep.)

5 Section 15. The End Stage Renal Disease Facility Act is  
6 repealed.

7 Section 20. The Alzheimer's Disease and Related Dementias  
8 Services Act is amended by changing Section 15 as follows:

9 (410 ILCS 406/15)

10 (For Act repeal see Section 90)

11 Sec. 15. Applicability. Programs covered by this Act  
12 include, but are not limited to, health care facilities  
13 licensed or certified by the Assisted Living and Shared Housing  
14 Act; Life Care Facilities Act; Nursing Home Care Act;  
15 Specialized Mental Health Rehabilitation Act of 2013; Home  
16 Health, Home Services, and Home Nursing Agency Licensing Act;  
17 and Hospice Program Licensing Act, ~~and End Stage Renal Disease~~  
18 ~~Facility Act~~. This Act does not apply to physicians licensed to  
19 practice medicine in all its branches.

20 (Source: P.A. 99-822, eff. 8-15-16.)

21 Section 95. No acceleration or delay. Where this Act makes  
22 changes in a statute that is represented in this Act by text

1 that is not yet or no longer in effect (for example, a Section  
2 represented by multiple versions), the use of that text does  
3 not accelerate or delay the taking effect of (i) the changes  
4 made by this Act or (ii) provisions derived from any other  
5 Public Act.

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