



Sen. Sally J. Turner

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10300SB2044sam001

LRB103 30685 AWJ 60011 a

1 AMENDMENT TO SENATE BILL 2044

2 AMENDMENT NO. _____. Amend Senate Bill 2044 by replacing
3 everything after the enacting clause with the following:

4 "Section 1. This Act may be referred to as the Gabby Galbo
5 Tickborne Disease Prevention and Protection Law.

6 Section 5. The Lyme Disease Prevention and Protection Act
7 is amended by changing Sections 1, 5, 10, and 15 and by adding
8 Section 7 as follows:

9 (410 ILCS 450/1)

10 Sec. 1. Short title; references to Act.

11 (a) Short title. This Act may be cited as the Tickborne
12 ~~Lyme~~ Disease Prevention and Protection Act.

13 (b) References to Act. This Act may be referred to as the
14 Lauryn Russell Lyme Disease Prevention and Protection Law.

15 (Source: P.A. 100-1137, eff. 1-1-19.)

1 (410 ILCS 450/5)

2 Sec. 5. Findings. The General Assembly finds and declares
3 the following:

4 (1) Lyme disease, a bacterial disease transmitted by
5 infected ticks, was first recognized in the United States
6 in 1975 after a mysterious outbreak of arthritis near Old
7 Lyme, Connecticut. Since then, reports of Lyme disease
8 have increased dramatically, and the disease has become an
9 important public health concern.

10 (2) The Centers for Disease Control and Prevention
11 states that the reported Lyme disease cases are numbered
12 at 30,000 a year in the United States, but the actual
13 burden of Lyme disease may actually be as high as 300,000
14 cases a year throughout the United States.

15 (3) The signs and symptoms of Lyme disease can vary
16 greatly from one person to another, and symptoms can also
17 vary with the length of time a person has been infected.
18 The initial symptoms of Lyme disease are similar to those
19 of more common diseases, such as a flu-like illness
20 without a cough or mononucleosis; it may or may not
21 present Erythema Migrans, a "bulls eye" marking, which is
22 the most common identifiable mark for Lyme disease, and
23 many infected persons do not recall a tick bite; further
24 symptoms can develop over time, including fever, severe
25 headache, stiff neck, certain heart irregularities,

1 temporary paralysis of facial muscles, pain with numbness
2 or weakness in arms or legs, loss of concentration or
3 memory problems, and, most commonly, Lyme arthritis.

4 (4) Not all ticks carry the bacterium of Lyme disease,
5 and a bite does not always result in the development of
6 Lyme disease. However, since it is impossible to tell by
7 sight which ticks are infected, it is important to avoid
8 tick bites whenever possible and to perform regular tick
9 checks when traversing in tick-infested areas of the
10 United States, any wooded areas, or any areas with tall
11 grass and weeds. A person should seek assistance for early
12 identification and treatment when Lyme disease symptoms or
13 other tick-borne illness is suspected.

14 (5) Because Lyme disease is a complex illness, there
15 is a continuous need to increase funding for Lyme disease
16 diagnosis, treatment, and prevention. In 2015, the first
17 major research program devoted to the causes and cures of
18 Lyme disease was established at Johns Hopkins School of
19 Medicine as the Lyme Disease Clinical Research Center.

20 (6) Initial funding from federal grants has provided
21 for research known as the Study of Lyme Disease Immunology
22 and Clinical Events. The federal 21st Century Cures Act
23 created a working group within the United States
24 Department of Health and Human Services to improve
25 outcomes of Lyme disease and to develop a plan for
26 improving diagnosis, treatment, and prevention. However,

1 there is still a need for more research on Lyme disease and
2 efforts to promote awareness of its signs and symptoms,
3 such as work with entomologists and veterinary
4 epidemiologist whose current focus is on tick-borne
5 infections and their distribution in the State of
6 Illinois.

7 (7) People treated with appropriate antibiotics in the
8 early stages of Lyme disease usually recover rapidly and
9 completely. The National Institutes of Health has funded
10 several studies on the treatment of Lyme disease that show
11 most people recover when treated with antibiotics taken by
12 mouth within a few weeks. In a small percentage of cases,
13 symptoms such as fatigue and muscle aches can last for
14 more than 6 months. Physicians sometimes describe patients
15 who have non-specific symptoms, such as fatigue, pain, and
16 joint and muscle aches, after the treatment of Lyme
17 disease as having post-treatment Lyme disease syndrome or
18 post Lyme disease syndrome. The cause of post-treatment
19 Lyme disease syndrome is not known.

20 (8) Co-infections by other tick-borne illnesses may
21 complicate and lengthen the course of treatment.

22 (9) Tickborne diseases, including, but not limited to,
23 Lyme disease, Spotted Fever Group Rickettsiosis,
24 ehrlichiosis, and anaplasmosis afflict humans and other
25 animals and are caused by infectious agents transmitted by
26 tick bites.

1 (10) Since 2013, tickborne diseases have been reported
2 more frequently in Illinois.

3 (11) Anyone participating in an outdoor activity,
4 especially in an area with tall grasses, shrubs,
5 low-hanging branches, or leaf mold, has a higher chance of
6 getting tick bites, but it is possible to get a tick bite
7 anywhere.

8 (12) Tick bites can occur throughout the year,
9 including during winter months.

10 (13) In 2018, the American Academy of Pediatrics'
11 Committee on Infectious Diseases determined that a course
12 of treatment with doxycycline is safe to prescribe to
13 young children with any infection responsive to it,
14 specifically including early tickborne diseases.

15 (Source: P.A. 100-1137, eff. 1-1-19.)

16 (410 ILCS 450/7 new)

17 Sec. 7. Definition. As used in this Act, "tickborne
18 disease" means any disease carried or caused by a tick.

19 (410 ILCS 450/10)

20 Sec. 10. Tickborne ~~Lyme~~ Disease Prevention, Detection, and
21 Outreach Program.

22 (a) The Department of Public Health shall establish a
23 Tickborne ~~Lyme~~ Disease Prevention, Detection, and Outreach
24 Program. The Department shall study the diseases carried by

1 ticks in Illinois and the number of people infected by ticks in
2 Illinois to provide data to the public on the incidence of
3 tickborne disease and locations of exposure by county in
4 Illinois. The Department shall require local health
5 departments, health care professionals, and laboratories to
6 report to each other and to the Department, within the period
7 specified in the Control of Communicable Diseases Code (77
8 Ill. Adm. Code Part 690) for reporting a communicable disease
9 case to local health departments, each case of a tickborne
10 disease in the local health department in whose jurisdiction
11 the case is reported. The Department shall continue to study
12 the population of ticks carrying Lyme disease and the number
13 of people infected in Illinois to provide data to the public on
14 the incidence of acute Lyme disease and locations of exposure
15 in Illinois by county. The Department shall partner with the
16 University of Illinois to publish tick identification and
17 testing data on the Department's website and work to expand
18 testing to areas where new human cases are identified. The
19 Department shall require health care professionals and
20 laboratories to report acute tickborne ~~Lyme~~ disease cases
21 within the time frame required under the Control of
22 Communicable Diseases Code to the local health department. To
23 coordinate this program, the Department shall continue to
24 support a vector-borne disease epidemiologist coordinator who
25 is responsible for overseeing the program. The Department
26 shall train local health departments to respond to inquiries

1 from the public.

2 (b) To raise awareness about and promote the prevention of
3 tickborne disease, the protocols and best practices developed
4 by the Department under subsection (a) ~~In addition to its~~
5 ~~overall effort to prevent acute disease in Illinois, in order~~
6 ~~to raise awareness about and promote prevention of Lyme~~
7 ~~disease, the program shall include:~~

8 (1) shall be published on a designated and publicly
9 accessible webpage, shall include up-to-date information
10 about the prevention, detection, and treatment of all
11 tickborne disease, and shall illustrate the prevalence of
12 tickborne disease using historical mapping ~~a designated~~
13 ~~webpage with publicly accessible and up-to-date~~
14 ~~information about the prevention, detection, and treatment~~
15 ~~of Lyme disease;~~

16 (2) shall be developed using peer-reviewed scientific
17 research articles;

18 (3) shall be developed using government guidance and
19 recommendations of the federal Centers for Disease Control
20 and Prevention, National Guideline Clearinghouse under the
21 Department of Health and Human Services, and any other
22 persons or entities determined by the Tickborne Lyme
23 Disease Task Force to have particular expertise on
24 tickborne Lyme disease;

25 (4) shall include information for physicians, other
26 health care professionals and providers, and other persons

1 subject to an increased risk of contracting a tickborne
2 ~~Lyme~~ disease; and

3 (5) shall include educational materials on the
4 diagnosis, treatment, and prevention of tickborne ~~Lyme~~
5 disease and other tick-borne illnesses for physicians and
6 other health care professionals and providers in multiple
7 formats.

8 (c) The Department shall prepare a report of all efforts
9 under this Act, and the report shall be posted on the
10 Department's website and distributed to the Tickborne ~~Lyme~~
11 Disease Task Force and the General Assembly annually. The
12 report to the General Assembly shall be filed with the Clerk of
13 the House of Representatives and the Secretary of the Senate
14 in electronic form only, in the manner that the Clerk and the
15 Secretary shall direct.

16 (Source: P.A. 100-1137, eff. 1-1-19.)

17 (410 ILCS 450/15)

18 Sec. 15. Tickborne ~~Lyme~~ Disease Task Force; duties;
19 members.

20 (a) The Department shall establish the Tickborne ~~Lyme~~
21 Disease Task Force to advise the Department on disease
22 prevention and surveillance and provider and public education
23 relating to the disease.

24 (b) The Task Force shall consist of the Director of Public
25 Health or a designee, who shall serve as chairman, and the

1 following members:

2 (1) one representative from the Department of
3 Financial and Professional Regulation, appointed by the
4 Director of Public Health;

5 (2) 3 physicians licensed to practice medicine in all
6 its branches who are members of a statewide organization
7 representing physicians, one of whom represents a medical
8 school faculty and one of whom has the experience of
9 treating tickborne ~~Lyme~~ disease, appointed by the Director
10 of Public Health;

11 (3) one advanced practice registered nurse selected
12 from the recommendations of professional nursing
13 associations, appointed by the Director of Public Health;

14 (4) one local public health administrator, appointed
15 by the Director of Public Health;

16 (5) one veterinarian, appointed by the Director of
17 Public Health;

18 (6) 4 members of the public interested in tickborne
19 ~~Lyme~~ disease, appointed by the Director of Public Health;

20 (7) 2 members appointed by the Speaker of the House of
21 Representatives;

22 (8) 2 members appointed by the Minority Leader of the
23 House of Representatives;

24 (9) 2 members appointed by the President of the
25 Senate; and

26 (10) 2 members appointed by the Minority Leader of the

1 Senate.

2 (c) The terms of the members of the Task Force shall be 3
3 years. Members may continue to serve after the expiration of a
4 term until a new member is appointed. Each member appointed to
5 fill a vacancy occurring prior to the expiration of the term
6 for which his predecessor was appointed shall be appointed for
7 the remainder of such term. The council shall meet as
8 frequently as the chairman deems necessary, but not less than
9 2 times each year. Members shall receive no compensation for
10 their services.

11 (d) The Tickborne ~~Lyme~~ Disease Task Force has the
12 following duties and responsibilities:

13 (1) monitoring the implementation of this Act and
14 providing feedback and input for necessary additions or
15 modifications;

16 (2) reviewing relevant literature and guidelines that
17 define accurate diagnosis of tickborne ~~Lyme~~ disease with
18 the purpose of creating cohesive and consistent guidelines
19 for the determination of a tickborne disease ~~Lyme~~
20 diagnosis across all counties in Illinois and with the
21 intent of providing accurate and relevant numbers to the
22 Centers for Disease Control and Prevention;

23 (3) providing recommendations on professional
24 continuing educational materials and opportunities that
25 specifically focus on tickborne ~~Lyme~~ disease prevention,
26 protection, and treatment; and

1 (4) assisting the Department in establishing policies,
2 procedures, techniques, and criteria for the collection,
3 maintenance, exchange, and sharing of medical information
4 on tickborne ~~Lyme~~ disease, and identifying persons or
5 entities with tickborne ~~Lyme~~ disease expertise to
6 collaborate with Department in tickborne ~~Lyme~~ disease
7 diagnosis, prevention, and treatment.

8 (Source: P.A. 100-1137, eff. 1-1-19; 101-606, eff.
9 12-13-19.)".