

1 AN ACT concerning health facilities.

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 12, 13, and 19.6 as follows:

6 (20 ILCS 3960/12) (from Ch. 111 1/2, par. 1162)

7 (Section scheduled to be repealed on July 1, 2006)

8 Sec. 12. Powers and duties of State Board. For purposes of
9 this Act, the State Board shall exercise the following powers
10 and duties:

11 (1) Prescribe rules, regulations, standards, criteria,
12 procedures or reviews which may vary according to the purpose
13 for which a particular review is being conducted or the type of
14 project reviewed and which are required to carry out the
15 provisions and purposes of this Act.

16 (2) Adopt procedures for public notice and hearing on all
17 proposed rules, regulations, standards, criteria, and plans
18 required to carry out the provisions of this Act.

19 (3) Prescribe criteria for recognition for areawide health
20 planning organizations, including, but not limited to,
21 standards for evaluating the scientific bases for judgments on
22 need and procedure for making these determinations.

23 (4) Develop criteria and standards for health care
24 facilities planning, conduct statewide inventories of health
25 care facilities, maintain an updated inventory on the
26 Department's web site reflecting the most recent bed and
27 service changes and updated need determinations when new census
28 data become available or new need formulae are adopted, and
29 develop health care facility plans which shall be utilized in
30 the review of applications for permit under this Act. Such
31 health facility plans shall be coordinated by the Agency with
32 the health care facility plans areawide health planning

1 organizations and with other pertinent State Plans.
2 Inventories pursuant to this Section of skilled or intermediate
3 care facilities licensed under the Nursing Home Care Act or
4 nursing homes licensed under the Hospital Licensing Act shall
5 be conducted on an annual basis no later than July 1 of each
6 year and shall include among the information requested a list
7 of all services provided by a facility to its residents and to
8 the community at large and differentiate between active and
9 inactive beds.

10 In developing health care facility plans, the State Board
11 shall consider, but shall not be limited to, the following:

12 (a) The size, composition and growth of the population
13 of the area to be served;

14 (b) The number of existing and planned facilities
15 offering similar programs;

16 (c) The extent of utilization of existing facilities;

17 (d) The availability of facilities which may serve as
18 alternatives or substitutes;

19 (e) The availability of personnel necessary to the
20 operation of the facility;

21 (f) Multi-institutional planning and the establishment
22 of multi-institutional systems where feasible;

23 (g) The financial and economic feasibility of proposed
24 construction or modification; and

25 (h) In the case of health care facilities established
26 by a religious body or denomination, the needs of the
27 members of such religious body or denomination may be
28 considered to be public need.

29 The health care facility plans which are developed and
30 adopted in accordance with this Section shall form the basis
31 for the plan of the State to deal most effectively with
32 statewide health needs in regard to health care facilities.

33 (5) Coordinate with other state agencies having
34 responsibilities affecting health care facilities, including
35 those of licensure and cost reporting.

36 (6) Solicit, accept, hold and administer on behalf of the

1 State any grants or bequests of money, securities or property
2 for use by the State Board or recognized areawide health
3 planning organizations in the administration of this Act; and
4 enter into contracts consistent with the appropriations for
5 purposes enumerated in this Act.

6 (7) The State Board shall prescribe, in consultation with
7 the recognized areawide health planning organizations,
8 procedures for review, standards, and criteria which shall be
9 utilized to make periodic areawide reviews and determinations
10 of the appropriateness of any existing health services being
11 rendered by health care facilities subject to the Act. The
12 State Board shall consider recommendations of the areawide
13 health planning organization and the Agency in making its
14 determinations.

15 (8) Prescribe, in consultation with the recognized
16 areawide health planning organizations, rules, regulations,
17 standards, and criteria for the conduct of an expeditious
18 review of applications for permits for projects of construction
19 or modification of a health care facility, which projects are
20 non-substantive in nature. Such rules shall not abridge the
21 right of areawide health planning organizations to make
22 recommendations on the classification and approval of
23 projects, nor shall such rules prevent the conduct of a public
24 hearing upon the timely request of an interested party. Such
25 reviews shall not exceed 60 days from the date the application
26 is declared to be complete by the Agency.

27 (9) Prescribe rules, regulations, standards, and criteria
28 pertaining to the granting of permits for construction and
29 modifications which are emergent in nature and must be
30 undertaken immediately to prevent or correct structural
31 deficiencies or hazardous conditions that may harm or injure
32 persons using the facility, as defined in the rules and
33 regulations of the State Board. This procedure is exempt from
34 public hearing requirements of this Act.

35 (10) Prescribe rules, regulations, standards and criteria
36 for the conduct of an expeditious review, not exceeding 60

1 days, of applications for permits for projects to construct or
2 modify health care facilities which are needed for the care and
3 treatment of persons who have acquired immunodeficiency
4 syndrome (AIDS) or related conditions.

5 (Source: P.A. 93-41, eff. 6-27-03.)

6 (20 ILCS 3960/13) (from Ch. 111 1/2, par. 1163)

7 (Section scheduled to be repealed on July 1, 2006)

8 Sec. 13. Investigation of applications for permits and
9 certificates of recognition. The Agency or the State Board
10 shall make or cause to be made such investigations as it or the
11 State Board deems necessary in connection with an application
12 for a permit or an application for a certificate of
13 recognition, or in connection with a determination of whether
14 or not construction or modification which has been commenced is
15 in accord with the permit issued by the State Board or whether
16 construction or modification has been commenced without a
17 permit having been obtained. The State Board may issue
18 subpoenas duces tecum requiring the production of records and
19 may administer oaths to such witnesses.

20 Any circuit court of this State, upon the application of
21 the State Board or upon the application of any party to such
22 proceedings, may, in its discretion, compel the attendance of
23 witnesses, the production of books, papers, records, or
24 memoranda and the giving of testimony before the State Board,
25 by a proceeding as for contempt, or otherwise, in the same
26 manner as production of evidence may be compelled before the
27 court.

28 The State Board shall require all health facilities
29 operating in this State to provide such reasonable reports at
30 such times and containing such information as is needed by it
31 to carry out the purposes and provisions of this Act. Prior to
32 collecting information from health facilities, the State Board
33 shall make reasonable efforts through a public process to
34 consult with health facilities and associations that represent
35 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, or the End
18 Stage Renal Disease Facility Act. These questionnaires shall be
19 conducted on an annual basis and compiled by the Agency. For
20 health care facilities licensed under the Nursing Home Care
21 Act, these reports shall include, but not be limited to, the
22 identification of specialty services provided by the facility
23 to patients, residents, and the community at large. For health
24 care facilities that contain long term care beds, the reports
25 shall also include the number of staffed long term care beds,
26 physical capacity for long term care beds at the facility, and
27 long term care beds available for immediate occupancy. For
28 purposes of this paragraph, "long term care beds" means beds
29 (i) licensed under the Nursing Home Care Act or (ii) licensed
30 under the Hospital Licensing Act and certified as skilled
31 nursing or nursing facility beds under Medicaid or Medicare.

32 (Source: P.A. 93-41, eff. 6-27-03.)

33 (20 ILCS 3960/19.6)

34 (Section scheduled to be repealed on July 1, 2006)

35 Sec. 19.6. Repeal. This Act is repealed on April 1, 2007

1 ~~July 1, 2006.~~

2 (Source: P.A. 93-41, eff. 6-27-03; 93-889, eff. 8-9-04.)

3 Section 99. Effective date. This Act takes effect upon
4 becoming law.